

**Being Taken In: How can psychoanalytic
psychotherapy lead to better relationships for an
adopted child?**

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Abstract

Neuroscience now demonstrates that a child's early relationships establish the brain patterns that make a mind (Balbernie, 2001). Through intersubjectivity, the qualities of these earliest relationships set up a frame of reference for understanding experience, as a way of getting to know the world to which the child must adapt in order to survive. They are thus framing relationships, which set a template for relating through which experience is understood. The template for neglected, abused and deprived children is adapted to a neglectful, abusive and depriving world, with the result that this is not just what they expect, it is what they experience, even when other possibilities are on offer. The question is, how do you develop if development happens through intersubjectivity in relationship and you experience the mechanism of change, the relationship itself, as suspect - even dangerous?

I address this question through investigating the process of intersubjectivity in psychoanalytic psychotherapy with an adopted boy of nine. Clinical material demonstrates how the early template, adapted to adversity, is applied to the present moment. The evidence suggests that the process of psychoanalytic psychotherapy, working by the same intersubjective process in which the brain was wired early on, is potentially a re-framing relationship. Its reflexive nature offers a way of addressing the problem that the mechanism of change, the relationship itself, is suspect. I offer findings from neuroscience and clinical material which support the view that the integration of intersubjective emotional regulation with attuned reflexivity constitutes the mechanism of change for disturbed children.

Keywords

intersubjectivity, framing relationship, neuroscience, psychoanalytic psychotherapy, emotional regulation, reflexivity, change

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Figure 1

Implicit processing of right brain and connections into left brain
(adapted from Schore, 2010:180)

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Introduction

The question of being taken in arose in intensive psychoanalytic psychotherapy over three years with a boy whom I will call Dan, who was neglected from birth and adopted at four. It became more and more apparent as we worked together that the relationship did not feel quite real, somehow. It was as if something was being left outside the room, outside the frame of reference for both of us, while something more fabricated went on between us. This is not to say that what was being made between us had no value, but it seemed to leave out something essential for Dan. As the clinical findings illustrate, he would fight quite hard for this essential something not to be brought in, seen and made explicit in therapy sessions. It seemed sometimes to take the form of a dog which had been badly treated. I found it by turns perplexing, frustrating, baffling; why wouldn't he let me take in the 'badly treated dog' part of him?

There may have been many subtle and complicated reasons, possibly to do with loyalty and identity, but I gradually began to understand a bit more about one of them: that he felt it was a trick, even a conspiracy. I think he may have felt that all the adults were in on it, and so he was a lone child, powerless in a desperately frightening world. He helped me understand that it felt to him as though in taking him into time-limited sessions, I had set a 'time bomb' and the 'badly treated dog', or neglected child part of him was not safe with me. Possibly the trick was also felt to be a risk to both of us – the dog may have looked in need of care and then bitten me, made me ill perhaps. It emerged that it was not a cuddly dog, not felt to be acceptable or impressive in any way. Our relationship seemed to be felt by him to be at the expense of this dog figure who had to wait outside. At first this seemed to be a price he was willing to pay, but as the work progressed he became more and more angry, and more and more hating of me. This raised the troubling problem of the conflicting aspects of being taken in, experienced as both nurturing and deceptive. In his world, the therapy room was a frightening place to be taken into, even though, or perhaps because, he may have felt the need for some of its qualities.

Here I would like to introduce Dan, the boy at the heart of this study, who engaged with me in the lengthy process of getting to grips with this dilemma, and venturing towards possible new meanings in the world of our relationship. Before I met Dan, I was invited to meet with his parents and other adults in his network to think about what might be helpful for him. As we sat in the meeting room talking, suddenly a small, slight, spirited nine-year-old boy flung the door open. It was Dan. He had been playing football in the playground while we met, and came in to say that he had lost his ball. He peered curiously round the door at me and ran out again. At this very first meeting, then, there was already a question about whether he should be in the room.

Dan's background was one of serious neglect. Early reports describe a little boy who was under-nourished, with sight problems and a learning difficulty. He and his two elder sisters were passed around in the family, sometimes separately, sometimes together, until at two, Dan was taken into foster care. Reports of contact visits at this time portray a smiley little boy, eager to please, in the face of relative detachment on the part of the adults. His foster home was a good one, and he seems to have begun to attach to his foster mother and her daughter. He was there a year before being placed for adoption with a family of a mother, a father and an older birth daughter.

The adoptive family soon found his behaviour challenging to the point of unmanageable. He would hurt himself, pinching and kicking himself and digging his nails into his own skin. He would also attack his mother and trash his bedroom repeatedly. It is hard to know how his adoptive family understood his destructive behaviour. Later parent work indicated that it had seemed unintelligible to them; he had seemed in this state of mind to be another version of himself, which they could not recognise or relate to. They expressed exasperation at the failure of their attempts to influence his behaviour with rewards and sanctions. A year into the placement, his mother became ill and needed hospital treatment. His problem behaviour escalated. He was seen by a counsellor for a year, after which funding ran out. The family were referred by their doctor to our Child and Adolescent Mental Health Service, and we offered

intensive psychotherapy, of three sessions a week, with supporting parent work fortnightly.

I found working with Dan absorbing and challenging. He often evoked the response of an appreciative audience in me, and I was very aware of the huge deficit in his experience of being an object of wonder and delight. He watched me like a hawk as I concentrated on him, enjoying him and his unique imagination. But it was a performance, and I think it meant that he was still left lonely on the stage. I was helped in supervision to think about other, less delightful aspects of him that needed to come in from the cold.

The question was, how? I will look later, in the chapter reviewing relevant literature, at the ways in which neuroscience and the science of perception now demonstrate that what we think we see is what we get. I am using the word 'get' here to mean take in or understand as well as receive. The question arises, how would it be possible for Dan to take in something he saw as deeply suspect, without the process being warped by suspicion? It would make sense to him to protect his vulnerability by leaving it outside the frame of the therapy, and present a performance. As we will see, his performance had vitality and energy, and evoked delight and wonder; but also communicated the feeling that something much darker was being kept out of sight.

The something much darker seemed to relate to his early procedural body memory of neglect and starvation, experienced in his birth family and stored out of conscious awareness. I will look later in this study at how early implicit memory shapes experience, but would like to point out here that the adopted child also has elements of experience outside awareness in the adoptive family which involve the feeling of something unacceptable, excluded. It can be the case that the adoptive family world is felt to exclude the world of the birth family, when adoptive families understandably wish to distance themselves from it, in their desire to offer something new, something better. This adds a further layer of complication to the experience of being taken in for the adopted child. It can cause maddening confusion for the child, not knowing to which world they belong, which template to apply, and thus having conflicting ways of

understanding what happens to them. Rather than floundering in the maddening confusion this entails, the child, especially when late-adopted, can resort to using the early world view as a frame of reference, and the adoptive family is seen in the context of that prevailing order. For example, late-adopted children sometimes feel that their adoptive parents have kidnapped them from loving birth parents, in keeping with a view of the world to which the birth parents subscribe. For earlier-adopted children, this world view is quite unconscious, having been laid down in procedural memory and thus not available to narrative awareness. For all adopted children, though, the world view is unconsciously transferred to the world of the therapeutic relationship, which is experienced by the child in ways consonant with the qualities of the patterns of relating in and between their multiple worlds - variously unpredictable, conflicting, confusing, depriving, neglectful or abusive, and also at times exciting, and even pleasurable.

In Hopkins' paper about late adoption, she explains:

One of the risks of adopting children in care is that they may perpetuate their deprivation by rejecting the loving care offered them. Clinical experience shows that, when this happens, it can sometimes be possible to facilitate children's attachment to their new parents by involving them in individual therapy. (2000:335)

She further suggests that the success of psychotherapy depends upon positive developments in one relationship spreading out to relationships with other people, and she points out that we do not yet have a systematic study of when that process might happen and what might facilitate it.

I do not propose such a systematic study here, but aim to investigate through this one case the process by which psychoanalytic psychotherapy may help an adopted child develop new connections and a different template for relating, thus opening the way to establish better relationships in the outside world. I use evidence of how ways of relating are established in infancy from child development studies and neuroscience, and look at parallels with the process of psychoanalytic psychotherapy.

Current neuroscience tells us that the intersubjectivity of the earliest relationship sets a frame of reference for experience, the world view to which I have referred. It follows that the process of being taken into psychotherapy will be experienced in this way - as part of this world, with its prevailing order being the qualities of the early framing relationship, transferred onto the person and room of the therapist. The wisdom of Klein's (1952) concept of transference involving the total situation, along with what we have learnt from recent neuroscience, implies that the child in therapy is showing us not just a relationship but the prevailing order of the world inside his or her mind, by which they experience what happens to them. Furthermore, much of this world view is unconscious, not available to autobiographical awareness, having been laid down in procedural body memory in the earliest years of life. The task of the therapist, like that of the new mother, is to offer a world into which the child can be truly taken, with all his impulses and force of feeling - paradoxically including the child's fear of being taken in by the therapist. The challenge is how to do this without triggering panic and flight/fright/fight reactions, and thus reinforcing the wired in connections. Ideas from child development studies and neuroscience about emotional regulation (Siegel, 1999) and attunement (Schoore, 2003) are critically important here, as are psychoanalytic ideas about temperature, distance (Meltzer, 1976) and levels of work (Alvarez, 2012).

The therapeutic relationship, then, is potentially a re-framing relationship, using the same process of intersubjectivity as a mechanism for change, so that constellations of new mind-brain connections can be made, and a new world of possible ways of relating is co-constructed. The early framing relationship needs to be taken into the world of the therapeutic relationship, and the therapist must find a way of getting to know it, find some relation to it, without being overwhelmed or limited by it. The therapist is helped in this task by supervision, which offers another world view, outside but able to contain the world of the therapy.

However, as we have seen, there is a problem, in that for the neglected, abused and deprived child, the mechanism of change - the intersubjectivity of the relationship - is suspect, and felt to be dangerous. Their template for relating is

adapted to a neglectful, abusive and depriving world, and as the following material demonstrates, this is not just what they expect, it is what they experience, even at times evoke. The clinical material shows how Dan's early template, adapted to adversity, is applied to the present moment. This raises the question, how can you change if change happens through emotional regulation in intersubjective relationship and you experience the mechanism of change, the relationship itself, as suspect - even dangerous?

In this enquiry, I aim to investigate the process by which psychoanalytic psychotherapy can effect change when the mind has been configured to experience relating itself as suspect and potentially dangerous. I examine this problem in relation to the feeling of being taken in, which seems to crystallize the contradictory nature of the experience. The phrase 'being taken in' can mean being offered a home, but it can also mean being the subject of a confidence trick, or even being swallowed up. It seems to link to the confusion and fear evident in children with a disorganised attachment, where the caregiver can be unpredictably a source of fear as well as good feelings. These conflicting meanings lie at the centre of the question of how new relationships are established, and will inform the whole study.

I have introduced Dan, the context of the therapy, and the germ of the thesis idea, which I will summarise here. It is that children's first relationships set a frame of reference, which for deprived, abused and neglected children is that of a depriving, abusing, neglectful world. It is in this way that they will experience relationships in general, even where this is not what is potentially on offer. Psychoanalytic psychotherapy offers a re-framing relationship, tasked with wiring in new connections through the same relational mechanism as the early experience: intersubjectivity - that is, mutual resonance and co-construction of meaning through emotional regulation. I have suggested that the significant challenge in work with fostered and adopted children is the problem of how to co-construct new meaning through relationship, when the very process of relating is itself suspect. How does psychoanalytic psychotherapy wire in new possibilities for relating, when relating is so frightening? This thesis is an attempt to address that question, in relation to the overlapping world views of child

psychotherapy, psychoanalytic theory, child development studies, and neuroscience. This synthesis is rooted fifty years ago in Anna Freud's (1965) idea of a psychoanalytic developmental psychology, which 'required a dialogue with other disciplines, including the more empirical disciplines of neuroscience, child psychiatry and developmental psychology' (Midgley, 2011:480). Here, I will try to show how views from these different but inter-related perspectives interweave in a complex way, potentially informing and deepening the awareness and practice of the therapist in relation to how meaning is mutually generated.

Some of the literature reviewed will address the complexity of the process of making meaning, first nascent in the potentiality of brain substrate, then leading towards the development of mind, through connections made by mutual behaviour triggers and responses and the understanding of these, and so to the generation of meaning. In her book exploring the links between psychoanalysis, attachment and neuroscience, Green offers a caveat:

There is of course not one definitive developmental 'story' but several, each ...offering its unique contribution and addressing questions of individual emotional growth at entirely different levels of explanation. (Green, 2003:3)

Furthermore, there is no simple equation of mind and body, nor mind and brain. However, the confluence of these accounts produces a picture of nature and nurture¹, science and creative imagination not as separate entities, but as influences in constant dynamic interplay, internal and external.

For example, Pally's work on the Mind-Brain Relationship points out that 'mental life is derived from biological events in neuronal circuits' (2000:2). We might want to call this process connection by association; connections that are embodied, but also potentially minded. Freud's free association, the cornerstone of analytic technique, uses these very connections. Memory researchers in cognitive psychology refer to 'associative networks: pieces of information are associatively connected with one another, so that activating one node (unit of

¹ See Music's (2010) *Nurturing Natures*.

information) on a network spreads activation to related nodes' (Westen, 2005:445). What comes to mind is what has been wired into a neuronal circuit by circumstance (Balbernie, 2001).

With this multi-dimensional interactive complexity in mind I will now outline the chapters which follow.

Chapter outlines

I will begin by framing the question in a review of the relevant literature from four main interlinking areas. First, I will look at child psychotherapy literature, particularly that which focuses on the formative impact of the relationship with the maternal mind as experienced by adopted and fostered children. There is a long tradition in child psychotherapy of theoretical consideration of technical clinical issues arising from work with children who have not had much experience of an available maternal mind. Second, I examine aspects of psychoanalytic theory focusing on ideas about the relational development of the mind and the internal world. Third, I will draw on child development studies with a focus on intersubjectivity and the developmental relationship with the maternal mind. Finally, I will refer to findings from neuroscience, particularly to do with the subjective, experience-dependent nature of perception and memory, and the inter-relation of the two hemispheres of the brain.

Music (2010) and others show how these distinct fields of study share common ground; each discipline brings a different perspective to the way in which a child's early relationships set a template for later relating. I would like to explore this common ground in relation to being taken in, both in adoption, and in psychotherapy. A particular area of interest is the link between how the child is taken in by the mind of the birth mother, and the child's own capacity to take in, or not, what is on offer.

In the next chapter, my aim is to consider the science of the art of psychotherapy, and what research methods might best serve such an enquiry. I address the central question of what the 'raw data' of such a study might be, and

how best to interrogate it. The nature of the enquiry is somewhat reflexive, in that my thesis explores the notion that relationships frame experience and ascribe meanings, which are first intersubjective, happening between people as bodies and minds resonate with each other, and then, once wired in through neuronal connections and internalised, they become intrasubjective, happening in the mind between mental representations of people.

In examining research methodologies, I take into account scientific studies of the way the mind is built and works; for example, studies of perception, which suggest that what we can take in or 'get' is limited or framed by what we can realise. I draw on neuroscience which demonstrates that what we can realise is, in turn, framed by our experience of mind-shaping relationships early in life and stored in episodic memory, unavailable for narrative awareness - the psychoanalytic unconscious. This has implications for the process of clinical research.

In working with Dan, I was studying the experiential process as it happened, a kind of reflexive live research into the way in which we were relating. Thus in this study I am therefore also researching the process of this research, as well as one particular aspect of meaning, to do with the nature of mental development and how it affects the experience of being taken in. The implications for a research study in this area are complex, particularly a study of the making of meaning which goes on in a psychotherapeutic relationship. I briefly review contemporary approaches to qualitative research, and consider whether objective and subjective stances in this area are mutually reinforcing, rather than mutually exclusive. This seems likely, given that observation, even scientific observation, is necessarily based on perception, which as we will see from objective studies, is subjectively determined. I point out that there is inevitably a frame of reference, which determines what is inside and what is outside the scope of attention. I touch on the idea that this frame of reference will inevitably have implicit as well as explicit elements. I then outline my research methods, including a discussion of ethical considerations.

In the clinical findings chapter, I describe the experiential exploration of what works in helping a child like Dan begin to be prepared to risk a new connection with me and with others in his life, despite his background of neglect, deprivation and serial losses. I use clinical material from the case outlined above to trace the co-construction of meanings made intersubjectively between the two of us during the therapy, involving recognition of both negative and positive aspects of the feeling of being taken in as they arose. Having given the clinical material in the form of process notes written immediately after sessions, including my own emotional responses, I offer a commentary, in which the material is closely examined. I have chosen material which demonstrates the complicated feelings and dynamics of Dan's conflicting worlds, taken in by the therapist and reflected upon as they are experienced in sessions. My aim is to show how a new world view is built in the therapeutic relationship, in which the worlds of both the birth and adoptive families can co-habit, first intersubjectively between us in the therapeutic relationship, and then eventually intrasubjectively, internally in the child's mind. Confidentiality prevents exploration of the inter-relating of the adoptive family as it emerged in sessions and in parent work, although this is intrinsically part of the adopted child's complex situation, and would make a fascinating area of study. For the same reason, I have refrained from including much of the school context, beyond essentials.

There follows a chapter evaluating the research, and discussing its implications for clinical practice in working with adopted children, in the light of the overlapping theories of mind-building drawn from child psychotherapy, psychoanalytic theory, child development studies and neuroscience. The implications for psychotherapy, which I explore in this chapter, seem to be that a re-framing process is necessary, in the context of a relationship in which new meanings are co-constructed. I examine the intrinsic problem that the therapeutic relationship is experienced in the child's mind through the connections made in the early template. 'Being taken in' to therapy for adopted children is thus fraught with all the pain and danger of the early situation.

Finally, I reflect on the experience of the case in a concluding chapter, and consider what factors in the psychotherapeutic process may have been helpful

in facilitating some change in Dan's capacity to feel himself to be fully take-
inable, as it were, that feels real, that he seems to have been able to draw on in
relationships outside the clinical setting. It seems possible that what I have
learnt from this one case and its supervision might be useful in thinking about
other cases.

Literature review

In this chapter, I will try to situate the question of being taken in in relation to relevant literature in four main overlapping areas:

child psychotherapy literature on fostered and adopted children, particularly the formative impact of the relationship with the maternal mind as experienced by fostered and adopted children;

psychoanalytic theory about the relational development of the mind and the internal world, especially Bion's ideas about containment in relation to the growth of mind, building on Klein's ideas about the internal world, and Winnicott's thinking on the facilitating environment and the development of the self;

child development studies of intersubjectivity: the way in which minds are developed in relationship, and this process in relation to adoption, and

findings from neuroscience about the relational nature of the way the mind is built and works: intersubjectivity as the mechanism of change, and the processing inter-relationship of the two hemispheres of the brain.

It is not possible within the scope of this study to explore these areas in great depth. However, I will highlight the particular relevance of each to the ideas under consideration, to do with the framing relationship into which a child is taken at birth, in adoption and in psychotherapy, which shapes the world as experienced by the child, and makes some things seem possible, and others not.

The themes are outlined here and will be revisited in the research evaluation, in which some of their joint implications involving the journey from body to mind to meaning are discussed in the light of the clinical findings. I turn now to a brief overview of child psychotherapy literature in the field of adoption and children taken into public care.

Child psychotherapy with fostered and adopted children

Boston and Szur's (1983) work on severely deprived children led the way in using child psychotherapy techniques with children who had endured very painful early experiences without access to a containing maternal mind, and had then been subject to shifting patterns of care. They noted that:

all the children, at times, some in more subtle ways than others, made their therapists feel useless, helpless, rejected, abandoned, messed up or cruelly treated - precisely the experiences and feelings which the patients themselves found intolerable or hard to bear. (Boston & Szur, 1983:58)

Marsoni (2006) considers the links between the child's early and ongoing traumatic experience in the context of the absence of a containing mind, and the absence of his capacity to be aware of, rather than inside, the trauma. She connects his inability to 'process and transform in his mind the concrete memory of what had happened to him' with his fear 'that he could be caught in it again any minute' (Marsoni, 2006:313).

Using Freud's (1909:122) 'unlaid ghost' metaphor as a frame of reference, Marsoni made sense of the explosive sessions she experienced in working with an adopted boy during the initial year of therapy. She understood his behaviour in this context, feeling that 'through these murderous fights Luke was making contact with his past' (2006:314). She was sensitive to the force of his emotions and sensed that her containing response needed to be limited to naming what he was showing her. She used a 'grammar of description', not a 'grammar of explanation' (Alvarez, 1997:755). Her feeling was that any attempt to explain or interpret the violence would escalate rather than contain it. My experience with Dan was similar in this respect, and there seems to be something important here in relation to the process of co-construction of meaning in the therapeutic relationship. If external, therapist-led meanings are applied too readily, it seems to reinforce the child's feeling of not having been really taken in to the mind of the therapist and understood. There seems to be a need for a phase where, paradoxically, the therapist receives the force of feeling from the child and is

thereby taken into the emotional world of the child. I would like to explore this idea further in Alvarez's contribution to the child psychotherapy literature.

Alvarez's experience of work with deprived and abused children has led her to think about the behaviour of disturbed children as communication, rather than as defence. She writes about a boy for whom 'some of my interpretations seemed to make him more mad. He complained that I did not know what it was like to be near a light bulb that is going to explode, and he was right - I was not getting the message' (1997:762).

She was influenced by Joseph's (1978) highlighting of disturbed patients' need for the therapist to be willing to feel the feelings evoked by the patient, and furthermore to feel them long enough 'to experience the missing part of the patient' or 'his or her previously unexamined internal object' (Alvarez, 1997:755). There seemed to be a need to take in, hold and digest the emotional experience of being with such children, painful and disturbing as it is, rather than serve it back to them too quickly in an interpretation, however accurate, of what might be going on. Alvarez attributes her change of approach in this area to being supervised by someone influenced by Bion's (1959) theory of containment. She stresses the distinction between 'the grammar of wishes in neurotic patients and the grammar of imperative needs in borderline patients' (1997:753). This allows for the developmental importance of offering the containment of primitive anxiety that children with disturbing early experiences have not had. It also involves a recognition of their struggle to protect themselves from emotional fallout that they cannot process.

Canham (2006) describes this dynamic in terms of digestion. In writing about work in a children's home, he notes that the lack of it can mean that a child's feelings and expectations from their previous experience 'can easily get recreated between the child and a particular worker, or within whole staff teams'. He explains that the 'dynamic re-enacting of past experiences that have not properly been understood and digested has, for a long time, been one of the key tools used in psychoanalytic psychotherapy' (Canham, 2006: 260).

Thus the reflective process of exploring the child's mind in psychotherapy involves a dynamic re-enactment, with experiences from the past re-lived and experienced in the present moment in the hope of being psychically and emotionally 'digested', that is, taken in and understood, so that the possibility of something new becomes available. The mental and emotional digestive system of the therapist needs to be made available to the child in the way that his mother's could not. Sorensen has alerted us to the active nature of this process in mother-infant relating and in psychotherapy: 'the complex, subtle and lively mental activity that contributes to, indeed constitutes, the work of a containing mind' (1997:113). She sees containment as a process, involving minute and sensitive observation, clarification for differentiation and emotional resonance: 'focusing, discriminating and feeling' (1997:118).

The wisdom of Alvarez's (1997) paper would suggest that if a child's extreme behaviour in a children's home is not contained, in Sorensen's active, emotionally resonant sense, is not taken in as an emotional communication which the child desperately needs someone to digest, but is instead attributed to the child too quickly, this would exacerbate the feeling of not being taken in and urgently reinforce the behaviour.

Canham (1998) has written about another aspect of lack of containment for children in care, that of life neither in nor out but constantly on the threshold, in transit, as if in a station waiting room, with children waiting for a new placement and staff permanently on a rota. The thinking of Rosenfeld and Sprince (1963, 1965) on 'borderline' children may relate to this state of being, which they relate to a incapacity to integrate sensory stimuli and a failure of ego function. This would seem to relate to an internal incapacity for containment, or the ego functions of 'focusing, discriminating and feeling' (Sorensen, 1997:118), which would inevitably arise from a lack of primary external emotionally-resonant containment. Canham discusses the importance of relational containment in work with these threshold children, suggesting that the defences children in care use 'match in strength the pain they are defending against' (Canham,1998:50) , and seeing 'the clinical relationship with the child as a source of information about the needs and wishes of that child' (Briggs, 2012: xxiii).

Although adopted children potentially have their new parents to take in their terrors and pain in a way that is hard for staff to manage in a children's home, they face another difficulty. Associated with the prelude to and lifelong process of adoption, there are serious losses to be digested on all sides. An aspect of this theme is discussed in Tollemache's (2006) paper on reconciling the differences between expectation and reality in work with adoptive families. She focuses particularly on the hopes and expectations of adoptive parents, and the difficulty of relinquishing these. Adoptive parents - though not of course only adoptive parents - thus have the daunting task of trying to contain powerful emotions for their children, while inevitably sometimes struggling to contain their own.

Although the expectations that adoptive and birth parents alike bring to the task of parenting are often unvoiced and perhaps unconscious, they are crucial to an understanding of the child's situation and behaviour. They are influential from the first weeks and months of the adoption in shaping children's attitudes and behaviour. Music makes the point that Winnicott's (1964a:88) famous dictum: 'There's no such thing as a baby', reminds us that 'we can only ever understand a baby in relation to the minds and behaviours of those around it' (Music, 2010:2). He distinguishes the sequelae of neglect, and 'the ways in which contemporary therapeutic technique has had to be refined and developed to work with them successfully', building on the work of 'thinkers such as Canham (1998) who particularly pointed us to the central importance of the countertransference in work with such children' (Music, 2012:191).

Boston and Szur's (1983) book on psychotherapy with severely deprived children, who are largely in the sort of transit Canham describes, addresses the question of the development of technique in various ways. One therapist affirms the need for 'a very firm analytic technique if there was to be any hope of eventually helping this child to be in touch with, understand and be able to bear the powerful feelings which underlay his disturbed and violent behaviour' (1983:36). In the same book, though, Hoxter writes of how "Painfully we learn that 'being in touch' is a torture for some children; what is intended to be a

gentle approach to contact may be experienced by the child almost literally as as a cruel stab at an open wound' (1983: 130). She alerts us to the need for attention to the raw pain of the client, which 'has to be attended to and encountered in ourselves...The pain remains unseen, our only perceptual organ for it is that most sensitive of instruments, our own capacity for emotional response' (1983:131). In terms of technique, she advocates sensitivity in the timing and wording of any approach, quoting Meltzer's comment about the need to 'tiptoe up to pain'. Rosenfeld and Sprince (1965) have stressed the need for attention to the form of the interpretation, not just the content, in therapeutic work with severely disturbed children. Meltzer (1976) has written of the need to offer responses at the right temperature and distance, not hotter, not closer than the child can bear.

In the work with Dan which I will come to in the third chapter, I often found that the two were linked; any feeling of closeness very quickly felt 'too hot' and I needed to learn how to help him cool down and give him some distance to recover. The form my interpretative response took was key to his capacity to take it in. But first I would like to explore the child psychotherapy literature which describes the effects of shifting, abusive and neglectful patterns of care on the child's own capacity for taking in.

Klein suggests that 'in unravelling the details of the transference it is essential to think in terms of total situations transferred from the past into the present, as well as of emotions, defences and object relations' (Klein, 1952:55). Her idea is that the child will bring to therapy expectations about relationships and mental representations of figures from their past, interacting in their mind and charged with the visceral emotions they carried at the time.

Rustin (1999) discusses the complexity of the adopted child's predicament, when moves have meant the new geographical and emotional territory is lacking meaningful landmarks and connections. She notes that the adoptive child often carries in mind a plethora of figures: birth parents and other family carers, adoptive parents, significant foster carers and social workers. She alerts us to the 'area of disorganized experience' (1999:52) in the child's mind, formed when

patterns of care have been too transitory to take shape in the child's mind: different adults in the family caring for the child in a disorganised way, institutional care with its shift patterns, or the experience of being cared for by a mentally ill parent.

The implication is that part of the huge challenge for therapist and adoptive parents is that this complicated shifting series of placements constitutes an environmental failure, which is experienced by the child as a formative pattern of caregiving, albeit disorganised, frightening and neglectful. It is not an absence. As Klein emphasized, the absence of something good, say, a feed, is experienced by the infant as the presence of something bad, a hunger pang. This is borne out by Brazelton, Tronick, Adamson, and Als' (1975) 'still face' experiments, discussed further in the child development studies section of this chapter, in which a very short absence of emotion on mother's face is seen to be disturbing for babies.

Klein (1930) suggests that when such a bad feeling is experienced, there is a desire to seek a representative to stand for the badness, as a regulation of this emotion. If such a figure is not available to mediate the experience, then the fear is overwhelming, and the internal representation carries the dread of the original feeling; it becomes symbolically equated with it in phantasy. Thus the child who has suffered overwhelming fear, without the protective function of a parental mind to mediate and regulate it, in Klein's terms, cannot 'distinguish between phantasy and reality in terms of the effect on him or herself, and reacts to the representation as if it were the original feared object' (1930:251). Those of us working with traumatised fostered or adopted children will have seen this happen many times. In more everyday terms, the child is so flooded with fear he or she cannot tell the difference between their own terror and the intentions of the other. Emanuel (2004) has pointed out how primitive responses are then triggered instantaneously by wired-in connections. Thus the anti-social behaviour of a child taken into public care is to be understood in the context of the frightening early experiences in which mind-body connections were made.

In contrast, where a relationship with a parental figure has helped to mediate suffering for a child, the fear is less overwhelming; there can be a representational object which carries some, though not all, of the emotional load. The frightening experience is processed in the parent's mind, and then begins to be understood between parent and child. It is not borne by the child's immature coping strategies alone, and thus is felt to be thinkable and survivable, inside a frame of reference. The experience is then moderated for the child, in first an external and then an internalised psychic relationship which can bear it, rather than the child feeling subjected to an onslaught of overwhelming emotion. If, as for many adopted children, no adult is available at a critical period to be seen as responsible for the terror, as a representative of the external world, then the child seems to be left with the feeling that they must be responsible, and that the terrifying thing is inside them.

Much of the child psychotherapy literature on adoption and fostering and the related area of deprived, abused and traumatised children illustrates this process. There are examples of it in work with Dan in the clinical findings chapter. Perhaps one way of looking at the purpose of child psychotherapy is to view it as an attempt to take compassionate responsibility for the failure of the early relationships and its consequent terrors. Hoxter writes:

As a therapist, one cannot allow oneself the comfort of passing on the blame to someone else; in the child's eyes one stands for the adult who is responsible for having failed him and one needs to be ready to receive the child's outbursts of pain and anger if one is ever to be able to help the child bear with such feelings himself. (1983:127)

I hope in this section to have shown that much thinking in the child psychotherapy tradition has been devoted to the technical implications for work with children who have suffered such psychically damaging early experience. I will now turn to key ideas in psychoanalytic thinking about the relational nature of the building of the internal world of the mind and the impact on the mind of the lack of a relational containing function.

Psychoanalytic theory about the relational development of the mind and the internal world

Bion's ideas about containment provide a useful starting point. He records being struck by something a patient said to him about not being able to take something in. Building on Klein's (1935) insight that Freud's (1917) shadow of the object does not simply fall upon the ego, but moves in and takes its own shape, so that internal representations of objects relate to each other in a whole internal world of object relations, he felt that 'the statement that something cannot be taken in must not therefore be dismissed as a mere way of speaking' (Bion, 1963:6).

He went on to say that such words did not just represent but actually conveyed to him something of the nature of the emotional experience. He was being given something to contain - a sense of something not being able to be taken in. He developed from this the idea that something in the patient is seeking containment, and is potentially found by the analyst's mind, in a way that is similar to an infant seeking and being found by the mother's mind. He sees this as taking place in extreme form when the baby is distressed or in pain, such that there is a fear of breaking down or falling apart. The mother's response will be decisive in shaping the baby's feeling about whether the world is a safe place or not, whether fear of annihilation can be contained, thought about and survived or not. Thus the initial bodily experience is given meaning through the response of the mother; it is felt to be catastrophic or not to the extent that the mind of the mother can take it in and survive it, without herself being felt to be destroyed.

In the terms of this study, the relationship with the mother thus provides a context, a frame through which experience can be understood. Perhaps sensation cannot be said to be experienced unless it has gone through this framework. The feeling may be of raw sensory onslaught that makes no sense, for the child has no way to bring it into awareness. Bion writes:

If alpha-function is disturbed and therefore inoperative the sense impressions of which the patient is aware and the emotions which he is experiencing remain unchanged. I shall call them beta-elements. In

contrast with the alpha-elements the beta-elements are not felt to be phenomena, but things in themselves. (1962:6)

Bion has used the term 'beta elements' for these unprocessed sense impressions, to differentiate them from the products of 'alpha function', in which a mother is able to experience the baby's feelings without being overly disturbed, thereby offering the possibility of surviving awareness of them. The implication of this is that, in contrast to a feeling of disconnected 'things in themselves', the mother's response serves the vital function of putting things in relation, of making connections.

In the absence of alpha-function, Bion (1963) describes how a child like Dan's contact with reality in infancy would have been pervaded by a terrifying sense of life-threatening catastrophe. Like Dan, Bion's disturbed patients attempted to get rid of both this sense of catastrophe and also those functions which might let it in. In the service of this impulse, he suggests that the very sense organs themselves, say, eyes and ears, are felt to be projected out in minute fragmentation as 'bizarre objects' (1967:50). These fragments are felt to be lodged in outside world objects, which are then attributed with the psychic qualities of their origins, for example, 'impregnated with cruelty' (1967:50) and so the outside world objects are then felt to be charged with the terror of annihilation.

The logic of Bion's thinking, along with the process of internalisation not just of figures but of relationships (Fairbairn, 1954; Klein, 1957; Greenberg & Mitchell, 1983) would suggest that this framing relationship lays down the form of the child's capacity for bringing sensation into awareness. It will of course influence the awareness of the adult the child grows into. For fostered and adopted children like Dan, the experience of containment is likely to have been compromised at best, or damaging. The intergenerational nature of this process will be evident.

It is important to note that different mothers will of course experience and so think about and name feelings in different ways, thus making different connections in a child's mind. When a child screams, his mother may

understand this as a cry for help and seek to allay the suffering, soothing the child and saying that it is a bad pain and will get better. When things go well, both partners can be perceived as loving – to others and perhaps to themselves. 'In a loving relationship they can be mutually beneficial. A model of this is the mother with her baby; both can grow through the experience of containing and being contained' (Symington & Symington, 1996:58).

The implication of Bion's containment theory and Klein's internal world is that the child takes in a number of things from this process: not only the soothing, but an internal relationship in which there is the capacity to soothe, and the capacity to be soothed. Importantly, in understanding the pain as not essentially part of the baby but in painful relation to it, the mother helps the child to separate himself from it; hence there may also be taken in the feeling that the pain is bad but it is not the baby himself that is bad. The infant also takes in the experience of things getting better, and thus the feeling that things can get better and annihilation may not lurk round every corner as they may have feared.

Another mother, however, may understand her child's scream as an attack on her and think of the child as being bad. In this case what the child experiences and internalises is likely to be very different; perhaps more like an unsoothability and a sense of badness. Furthermore, a relationship is internalised in which things cannot get better and instead can get appreciably worse. Being in pain and frightened with no sense that things can get better, with no separation understood between pain, screaming and child, the child is likely to internalise a feeling that he is himself essentially part of the badness. It seems to me that this had happened for Dan. Perhaps here are some of the roots of his and other adopted children's damaged capacity to take in or be taken in.

Klein (1930) sees a degree of anxiety which is not overwhelming as important for normal development, triggering a capacity for symbolisation. In the terms of this thesis, the primary parental frame of reference is key here. If there is someone there to help mediate frightening experiences, including that of the child's own angry, hating and destructive impulses, anxiety can be tolerated.

Klein's 'depressive position' (1935) in which the child can bear for good and bad experiences to be felt to come from the same object and not have to be split off and defended against, is achieved. The child can bear for the object to be lost without feeling himself to be destroyed, and thus can feel sad and mourn what has gone. For Klein, the symbol - thing, word or thought - represents the lost object. As Bion, working in the Kleinian tradition, put it: 'Sooner or later the 'wanted' breast is felt as an 'idea of a breast missing' and not as a bad breast present' (1962:34).

But this development presupposes the availability of an attentive maternal mind. It is hard to overstate the significance of this function, evolving in the early infant-mother relationship, which can turn the possibility of catastrophe into meaningful events, experienced as occurring within a frame of reference. When the mother's psyche is open to receiving the signs of catastrophe which her baby emits in what Bion has called 'maternal reverie' (1970), the baby's unthinkable fear of catastrophe is transformed, and the baby takes in not only the transformed experience but also the function which transforms, developing a feeling of going-on-being (Winnicott, 1956) which persists through catastrophe.

Thus the mother's experience frames her response to the child, and the child develops inside and in relation to that frame of reference. The implication of Bion's theory of thinking suggests that there is a parallel with therapy here – it is not so much that the mother or therapist has named a feeling correctly, more that she or he will more or less sensitively pick up what the child is feeling, and respond to it with an idea of what it might be. The drawback of the word container is that it invokes the idea of something static, and yet the relationship Bion (1963) describes is one of constant reformulation of subtle and changing nuances. Between the mother and infant, as feelings are expressed, the mother's idea will frame the experience of that feeling, and the child's response will refine and shape her naming of it, and so the relationship will continue to develop along idiosyncratic ways, contributed to by both of them in mutual resonance. This process of movement between incoherence and integration by naming is an idea which has been furthered by other psychoanalytic thinkers more recently; for example, the work of Bollas.

Bollas (1999) suggests that the technique of free association used in psychoanalysis is essentially destructive of the story of what has gone before, opening the self into an uncertain and open-ended future. In writing about the goals of psychoanalysis, he reasserts Freud's 'evenly suspended attention' (1924:239) as the analyst's invitation to the patient's free association. He writes:

The speaking of deep free associations uses the analyst-other as an object exploiting their suspension of the relational perspective to liberating effect as the self finds in such paradoxical intimacy a deep mutual involvement in a process that deconstructs relational possibilities just as it joins two subjectivities in separate worlds of thought. (Bollas, 1999: 66)

I would suggest that free association suspends not the relational itself, for there is a 'paradoxical intimacy', but the relational frame of reference that has been mis-set by the early framing relationship when it did not sufficiently meet the impulse of the infant. I will shortly turn to Winnicott's thinking in this area, for whom the impulse of the infant is paramount.

However, what Bollas describes is a dynamic process, each element influencing the other, through which interaction a truer, more attuned meaning develops. This idea of an intersubjective process leading to meaning has links with child development research and with neuroscience, which I will return to later in this chapter, but I would first like to note that my understanding of Bion's (1959) idea of the containing response involves more of a moving towards understanding than a total grasp of it. The idea that this relationship is not static but dynamic, that there is an inter-relation between the container and what is contained, has implications for the study of interpersonal experience. He sees the element seeking containment as inchoate, unformed, given shape by the receiving container/mind. The implication is that the shape it is given is one of a number of potential forms it might take – the relationship between the two elements influences the form. It provides a frame of reference, or rather, an ongoing framing relationship, without which experience is meaningless.

Applying Klein's theory of the internal world (1958) to this thinking gives rise to the idea that the child will take in not only the content of any one particular example of this process of attributing meaning, but the nature and qualities of the process itself - what the containing relationship feels like. There are studies of the therapeutic process (see Horvath, 2005, for a review) that bear this out, showing that here, too, the qualities of the relationship are most significant in influencing therapeutic change, rather than any particular model.

Bion extends his theory to encompass thinking, suggesting that the meeting and interaction of container and contained is how mental growth occurs at every stage of development (Bion, 1970). He suggests that it is possible to see these dual components in the relationship not just between people, but between thoughts. He described this interaction in terms of an impulse seeking a mind to contain it (Bion, 1991). Later neuroscience would confirm this view, as I shall discuss towards the end of this chapter.

These ideas have a parallel in Winnicott's thinking about holding and the facilitating environment. He saw the facilitating environment as something like the climate in which a plant may grow, the seed of which already contains its own potential fulfilment.

His paper *Psychoses and Child Care* (1952) focuses on the implications for a mis-meeting of the child's impulse and the thinking mind of the mother. In an environment where there is faulty adaptation to the child's needs, environmental impingement, the child must react to this impingement. The sense of self is lost and is regained only by withdrawal and return to isolation. Winnicott's theory of the true and false self is based on the idea that the mother needs to meet the creative impulse of the infant without imposing an impulse of her own. Doing this would lead the child to begin to orientate itself around the mother, rather than the other way around, and develop along compliant lines, creating a brittle false self rather than a resilient true self which can weather life's storms more effectively.

He sees the parents' task as facilitating the emergence of the true self in its full creativity, able to achieve intimacy and to relate in a way that feels real, and not staged or manufactured, unlike the theatricality we will see shortly in some of Dan's material. It depends on the parents' enjoyment of the person they helped to make; and the lack of it risks a deep schism in the mind, which 'at its deepest is labelled schizophrenia' (Winnicott, 1964b:66).

He describes a less serious situation where the split does not go as deep as this, and the protective function of the false self allows life to continue, albeit on compromised terms, and in the meantime searches for suitable conditions.

The true self is, however, acknowledged as a potential and is allowed a secret life. Here is the clearest example of clinical illness as an organization with a positive aim, the preservation of the individual in spite of abnormal environmental conditions. This is an extension of the psychoanalytic concept of the value of symptoms to the sick person. (Winnicott, 1960:143)

Perhaps this is one place where psychotherapy may be of value, and the use to which the psychotherapist is put is to seek out and offer a more sensitive response to the patient's feeling. Rosenfeld's work is highly relevant to the question of aspects of the self and their recovery in therapy. He described (1950) how confusional states arise when the early structuring splitting between 'good' and 'bad' is not established. He suggests that the analyst needs to put him or herself in the position of such a patient, in order to understand what they want to communicate. He seems to have done this through close attention to what the body of the patient was telling him, through his own internal resonance. He advocated:

constructive use of counter-transference...carefully monitoring one's own emotional life as it emerges, and using those tell-tale elements that can help us understand what is happening in the patient, something we would not have been able to understand if not through our own internal resonances. (Rosenfeld, 2001)

His idea is that unrecognised good and bad parts of the self may be put into the analyst. He suggests (1972) that where a patient has impaired or absent ego

function, the analyst may need to function as an auxiliary ego, thus facilitating the development of an internalized ego function. Without this auxiliary function - in developmental terms we may perhaps say processing help - the child is left to manage in a second skin or false self way, as a protection against falling apart altogether.

In working with Dan, it was apparent that he had developed a false self, conveyed by the theatricality of some of the material which I will give in the clinical findings chapter, for example, a dancing waiter performance. He had had very little experience of his parents' early enjoyment of him, and Winnicott's schism between the waiter and his true self was so deep that it was hard for him to use my attempts to put words to his feelings. It seemed to shatter the protective shield of his act and leave him feeling exposed and in extreme danger.

Winnicott's idea of the growth of the true self is that it is already there in essence, either cloaked in a false compliant self or brought forth to shine by loving parenting. Both Bion and Winnicott's idea is that truth is unknowable, even about oneself. For Bion, versions of the truth are always provisional and to be sought in dialogue between minds or between parts of a mind.

Having looked at some central psychoanalytic ideas about being taken in, to do with the internal world, containment and the facilitating environment, I would now like to turn to the child development literature which bears out these theories and illustrates the crucial importance for the child of the mother's capacity to take in her child's state of mind.

Child development studies: intersubjectivity and the developmental relationship of the child with the maternal mind

There have been many studies of the effects of parental attitudes on their children, including for example studies of obesity (Johansen et al, 2006), alcohol problems (Jacob & Johnson, 2007) and education (Gorman, 1998). There is not space here to review them all, but they collectively point to the significance of

the relationship with parents as a shaping factor in children's lives and behaviour.

Alongside those focusing on problematic areas, there have been a number of recent studies of factors promoting well being and resilience in children - parental warmth (Smith & Prior, 1995); the child's perception of parental warmth (Quamma & Greenberg, 1994); emotionally responsive and competent parenting (Wyman et al, 1999); attachment security (Anan & Barnett, 1999; Suess, Grossman & Sroufe, 1992), and maternal reflective function (Fonagy et al, 1994).

For good or ill, it seems, our earliest relationships shape our lives. This may seem self-evident. However, it is becoming more and more clear from recent studies of mother-infant relating that these relationships also shape our minds.

McGilchrist writes of how 'subtle unconscious perceptions of minute facial changes that govern our reactions are picked up by the right hemisphere, mirrored and synchronously matched by the observer's right hemisphere within 300-400 milliseconds' (2010:71).

Here is the scientific basis of intersubjectivity. It seems from this evidence that we are much less bounded as an individual than we realise. Unconsciously in conversation, our right brains are picking up on infinitesimal signals from the other person, and responding in kind. The discovery of the existence of mirror neurons, activated in the brain whether one is observing an action or performing the action oneself, has been important in helping us understand how physically powerful are our imaginative connections with another person. McGilchrist explains:

Mirror neurons are a means of understanding another's intentions, amongst other things, and are not just about copying another's actions. They form part of our capacity to understand others and empathise with them. (2010:58)

Interestingly, neurons fire just as readily when witnessing a fictional incident in a film, or imagining one when reading (Harris, 1998). This is evidence for the mutuality of experience - there seem to be no sharp lines between the experience of one person and another, but instead a physically embodied imaginative connection, so that experience can be felt to be mutual. The participants do not even have to be present; internal imagery can activate and stimulate the same brain systems as do actual sensory perceptions; thinking or dreaming about an experience activates the same pathways as are active during the experience (Perry, 1993).

Research into early infancy confirms the presence of a predisposition to not only relate to but be moulded neurologically by a 'virtual other' (Braten, 1998). Braten explains that:

Recent infancy research findings, revealing the capacity for intersubjective attunement from birth, have replaced earlier theoretical views of infants as a-social and ego-centric with a new understanding of infant capacity for interpersonal communion and learning by other-centred participation. (2008: 134)

He goes on to distinguish three stages in the process from attunement to the internalisation of relationships. The first is primary intersubjective attunement, seen from the very beginning of life and involving body and mind. There is turn-taking and mutual mirroring, with physical gestures mutually reflected, for example the opening of the carer's mouth in offering food. Secondary intersubjective attunement follows, which introduces a third into the 'conversation', for example, a joint point of interest. Thirdly, there is a move towards tertiary intersubjective understanding, emerging in conversational and narrative speech, entailing not only a sense of narrative self (Stern, 2003) and other, but also another level of understanding of others' minds and emotion. This opens the way for emotional absorption, even in fictional others (Harris, 1998) and for seeing things from another point of view, and trying to imagine what might be going on in someone else's mind. Braten's work suggests that this simulation of mind is predicated upon a mutually attuned relationship that

has been taken in, and, furthermore, wired in through neuronal connections established in the developing mind of the baby.

Trevarthen's (1993) work with mother-infant dyads helped establish the basis for these ideas. He argues for 'innate intersubjectivity' as the basis for infant psychology. The mutual resonance between infant and mother when things go well allows for the regulation of positive affect brain states. Gerhardt (2004) describes the importance of sensitive, available care-giving adapted to the baby's needs, along Winnicottian lines. She makes clear the biochemical potential for problematic development when this does not occur - for example, an early overload of the stress hormone cortisol, which effectively sets the stress 'thermostat' in the infant brain too high. This contribution from biochemistry interweaves with Bion's theory of containment, bringing to mind Anna Freud's call for a 'double orientation' (A. Freud, 1961) towards both body and mind. The mother's capacity to respond to her child's stress overload is critical in the child's developing sense of meaning, indeed his or her sense of self. The child is physiologically stressed, and depending on the maternal capacity for reverie, the behaviour that ensues may be seen as a communication of a physical/emotional state, or as unmanageable behaviour on the part of the child felt to be wilful, even persecutory. If no maternal mind is available, the effect on the child is disastrous; with no sense-making capacity, Bion's alpha function, the experience is both overwhelming and meaningless.

There have been a number of studies of the effect of an impaired or absent maternal state of mind on infants. One striking example which shows how quickly effects take place is the 'still face' experiment. Brazelton, Tronick, Adamson, and Als (1975) describe how an infant, during only three minutes of interaction with a mother looking blankly back, rapidly grows wary. Having made repeated failed attempts to get the interaction into its usual reciprocal pattern, the infant withdraws, and furthermore squirms in evident distress, turning face and body away from his mother, and looking withdrawn and hopeless.

The children in the study showed confusion and distress almost immediately, so tuned in were they to their mother's moods. They soon protected themselves by

turning away. This response in the babies showed that even a very brief absence had an effect – a blank face was not neutral for these babies, but seemed to be experienced as something hard to tolerate, which caused distress and necessitated turning away. They seemed to try harder for a while to reach out in order to re-establish normal responsiveness, but then seemed to lose faith in their capacity to enliven their mother's face, and fall apart, almost as if in despair.

The logic of Bion's (1959) theory of the reciprocity of containment would suggest that the experience of unresponsiveness is taken in as part of the framing relationship. It is not the mother's silence which disturbs the babies, it is her lack of response. It may thus be not so much the content, a still face, as the process, a lack of mutual responsiveness, which is taken in. The experiment suggests that it is not neutral to be neutral in human interaction, which would seem to have implications for the process of psychotherapy. A blank face, on the evidence of this research, is experienced as disturbing to the infant self. In the chapter evaluating the factors which may have been helpful for facilitating change, I will consider the notion of therapist as a 'present developmental object' (Green, 2003; Hurry, 1998), which seems to have some bearing on the idea of therapeutic neutrality.

This may be the case for babies of mothers with depression. A large body of literature documents the adverse effects of maternal depression on the functioning and development of offspring. For example, Goodman and Gotlib (1999) identified maternal depression among risk factors for abnormal development and psychopathology in children. Field, Healy, Goldstein, Perry, Bendell, and Shanberg et al (1988) found that the 'depressed' behaviour of infants with depressed mothers generalised to interactions with non-depressed adults - as early as three months of age. The implication of this seems to be that the relationship with the mother frames all the baby's interactions, not just those with their mother. However, there was a hopeful sign in a later study (Pelaez-Nogueras, Field et al, 1994), which showed that in interaction with familiar non-depressed adults, the researchers noticed strong reciprocal influences, and the

babies' mood lifted. Thus the babies' behaviour was relational; it was to be understood in the context of a particular relationship.

Furthermore, child development studies have shown that our sense of self is laid down in these early years, patterned by our earliest relationships. Stern (1985) describes how abuse or trauma suffered during sensitive periods will adversely affect the nature of this sense of self. He describes the 'core self' as being established in babies as young as two to nine months in 'not only the feeling experienced but also the experience of interpersonal evocation or regulation or sharing' (1985:205). In effect, he is saying, not just what is shared between mother and child, but even more significantly, how the baby is regulated emotionally in their interactions, is internalised as not only a way of being, but as the core sense of self. For Dan, this early way of being was disturbed and disturbing, and the clinical material that follows suggests that its qualities did seem to have been embedded in his sense of self.

For all adopted children, this core sense of themselves has had to incorporate painful things. There may have been abuse and neglect, as well as the reality of loss and of having been lost or given away. This seems to be a central point; if the qualities of the framing relationship with the mother establish a core sense of self, then this function being damaged is internalised too, and contributes to the child's sense of a damaged self.

It is hard to see how Winnicott's (1960) true self could somehow be protected from the damaging relationship, if the sense of self comes from that relationship. Put in terms of child development studies, attachment is internalised, 'being built into the nervous system, in the course and as a result of the infant's experience of his transactions with the mother' (Ainsworth, 1967:429). There would have to be another world in the child's mind, built from other kinds of experience in relating, so that other views of himself were possible, and from what we have seen, this would be formed in relationship. It would therefore necessitate another relationship, with very different qualities. It may be that other family members are important here. It may also be that the framing relationship is a constellation of emotional responses, which includes other qualities than that of

damage, so that the sense of self is more multi-faceted and complex, and less of a single entity than it sounds. These questions seem to me to merit further study. However, what is clear from these studies is that this early relationship lays the groundwork for future relating.

Interestingly, the effects of the maternal state of mind have been found to apply to adoptive mothers too - overlaying with another layer of complexity the complex patterns of care adopted children are already likely to have in mind. A study of attachment representations soon after adoption (Steele et al, 2003) warrants a closer look, being especially pertinent to the theme of the complexity of the framing relationship for the adopted child.

The study compares Adult Attachment Interviews obtained from adoptive mothers, with emotional themes appearing in the play narratives of their recently adopted children. The children were between four and eight years old, and all had been subject to neglect and abuse in their birth families.

The authors point out that the more children had been moved from one family to another, the greater the chances that they would be highly attuned to the parent figures' state of mind and have an attachment system that is very quickly activated. They reasoned that this might have a kind of survival function, helping them in grounding themselves and trying to understand something of the new emotional, cultural and physical environment in which they found themselves.²

The evidence of the research was that themes of catastrophic fantasies, death, aggression, throwing away and bizarre content were significantly more likely to appear in the story completions of children adopted by insecure mothers as opposed to secure ones. This is significant in relation to Dan's experience in his adoptive family, for his mother had herself undergone a troubled childhood. It would seem then that adopted children tend to tune in quickly to the adoptive mother's state of mind, which acts in a formative way on their own state of mind, and on their world view and expectation of what is likely to happen in life.

There have been other studies of intergenerational transmission of attachment patterns (Fraiberg et al, 1975; Van IJzendoorn, 1995), focusing on genetically linked parents and children. If we are geared to relate to our pattern of care, which provides a template or frame of reference for understanding experience, there are serious implications for adopted children, deprived of an enduring attachment relationship with their biological caregiver, and then undergoing shifts of caregivers.

Alongside the adoptive mother's pattern of care, the shifting caregiving pattern itself is formative, as Rustin (1999) has pointed out. Hodges et al (2003) found that late-adopted children with discontinuities of care and multiple placements, a year into their adoption, showed no decrease in negative representations of adult behaviour as aggressive or rejecting. There were some positive changes in representations of adults as more available and limit-setting, for example, but the study suggests that these 'do not automatically transform the already established representations' (Hodges et al, 2003:360).

Furthermore, Bowlby (1980) showed how these various representations form multiple models in the child's mind which require more psychic energy than a singular well-functioning internal world made up of coherent representations, and often occur in a context of confusion and fear. It would seem likely that for adopted children, who have not only suffered the loss of their primary caregiver, but for whom this same caregiver was often but not always a perpetrator of abuse or neglect, this shifting pattern in a context of confusion and fear, may itself become the frame of reference.

It is another link between psychoanalytic thinking and neurobiology that attachment results in the development of internal working models, like the representations of adult behaviour in the studies (Steele et al, 2003) quoted above, which impact upon the development of later relationships. The impact of caregivers' own upbringing affects their relationship with their children, adoptive or otherwise. We have seen how insecurely attached adoptive mothers tend to evoke feelings of impending catastrophe in their children. Traumatic, disorganized or disoriented attachments often involve an adult whose history

includes unresolved trauma. More subtle disturbance in the attachment relationship, such as role-reversal or emotional withdrawal, may also result in a traumatic attachment style developing (Solomon & George, 1999).

The psychoanalytic wisdom that unconscious expectations about relationships are set by our experience of relationships, has been established as scientifically valid in child development studies such as those quoted above. I will now draw briefly on findings from neuroscience that show how this process happens, how we are wired for and by relationships, especially our earliest.

Findings from neuroscience about the relational nature of the way the mind is built and works

Over the past two decades, neuroscience has moved us some way towards a fuller grasp of how early experience shapes our brain (Schore, 1994) and our emotional responses (Perry et al, 1995; Siegel, 2001). Balbernie (2001) explains that a baby's emotional environment influences:

the neuro-biology that is the basis of mind. From the infant's point of view the most vital part of the surrounding world is the emotional connection with his caregiver. It is this that he is genetically pre-programmed to immediately seek out, register and exuberantly respond to. (Balbernie, 2001: 237)

It has emerged in recent years that this emotional connection with the caregiver has a home in the neurobiology of the right brain. A body of neurobiological research shows that the right hemisphere, or 'right mind' (Ornstein, 1997), which takes precedence in the first three years, is dominant for the perception and expression of nonverbal communications (Blonder et al 1991; Dimberg & Petterson 2000; Schore, 1994, 1998, 1999). Schore (2001) tells us that although the process of emotional regulation arises early on in the right brain emotional communications within the mother-infant dyad, this process plays an essential role in the communication of emotional experience in all later periods of development.

The implications for sensitive maternal attunement are clear. Schore's work shows that the capacity to self-regulate emotion, depending upon social context 'emerges out of a history of regulated interactions of a maturing biological organism and an early attuned social environment' (Schore, 2003: 259).

Thus the process of communicating and regulating emotion are intrinsically twined, beginning in the mother-infant dyad intersubjectively, in mutual emotional resonance between the two people involved, and then continued intrasubjectively in the growing child's mind in a mental representation of the original relationship, involving the original emotional responses. Both the wired in intrasubjective experience and the process of intersubjective communication as regulation of emotion continues throughout life, though its developmental impact is greatest in our earliest years.

Importantly for the theme of this thesis, the implications are that all later relationships occur in the context of this primary relationship. The qualities particular to this relationship will, as it were, shape the lens through which future relationships are seen. This relationship seems to provide the emotional frame of reference, so that other ways of being in relationship are outside awareness.

Siegel writes that how 'we experience the world, relate to others, and find meaning in life are dependent upon how we have come to regulate our emotions' (Siegel, 1999:245). We have seen how emotional regulation happens intersubjectively, each partner tuning in to the other's state of mind.

Intersubjective emotional regulation, then, is formative - it is a developmental mechanism. This relates to procedural memory, laid down in the body, of not just what but how things were experienced, their emotional qualities setting the nature and tone of implicit connections. In the next chapter, I refer more fully to Schore's (2003:69) work explaining how the orbitofrontal system involved in emotion-related learning retains plasticity throughout life. Here we have the mechanism through which psychotherapy works.

In writing about the reconstructive properties of memory processing, Pally describes how what is later remembered 'is constructed on the spot', together

with all the sensory and emotional impressions of the present moment, and thus is not an exact replica of what happened in the past. 'All the neural elements involved in the processing of events... serve as new information to be stored as additional memory traces of the event (1997:1229). These new neural elements include the emotional qualities of the present intersubjective relationship. Thus the psychotherapeutic relationship offers the scope for change, through new patterns of intersubjective emotional regulation opening new neural pathways alongside old connections. However, for abused and deprived children, the emotional qualities of the present intersubjective relationship can include an implicit feeling of danger, even when there are more positive feelings alongside this. We will see evidence of this in the clinical findings. It is thus necessary to find a way to bring this implicit feeling of danger into awareness, without destroying the implicit experience of new emotional qualities. The implication is that the bringing to awareness needs to happen in a way that attends to emotional regulation. I will discuss this further in the evaluation and conclusion chapters.

Before leaving this brief review of some of the relevant neuroscience, I would like to link the idea of a frame of reference to the nature of the relationship between right brain and left brain. The importance of the inter-relation between the two hemispheres of the brain for emotional processing is a huge subject and I can only very briefly consider it here.

McGilchrist (2010) sums up the distinctive contributions of the hemispheres:

Ultimately, the left hemisphere is the hemisphere of 'what', the right hemisphere, with its preoccupation with context, the relational aspects of experience, emotion and the nuances of expression, could be said to be the hemisphere of 'how'. (McGilchrist, 2010:71)

He warns against an over-simplification, reminding us that the two halves of the brain share many functions and inter-relate continually, but suggests that overall, the left hemisphere deals with the explicit, and more conscious processing, while the right hemisphere specialises in implicit, non-verbal communication.

Both the content and the process have an impact on the child's experience – what is felt to be happening and how it feels are both shaped by the first relationship, and furthermore are mutually influencing. Does the relation between the two hemispheres reflect the early processing of the emotional impact of sensory experience? Could the way in which the left hemisphere assesses and looks for pattern in the awareness of the right hemisphere be a means of seeking Joseph's psychic equilibrium (1989), in the way laid down by the primary relationship? It would seem to be a way of selecting what to prioritise, of all the plethora of sensory and emotional input of everyday life. It is an area which might reward further study. It seems possible that implicit right brain to right brain emotional attunement integrated with the explicit coherent narrative overview properties of left brain processing sets the pattern for integration of experience.

Overall in this literature review, I have tried to outline child development and neuroscience studies which show how the process of early experience shapes psychobiological development in ways which influence our social responses over the course of our lives. I have addressed the question of how, in the overlapping disciplines of child psychotherapy, psychoanalytic theory, child development research and neuroscience, the process of intersubjectivity is seen as essential in establishing a pattern of emotional regulation that becomes a core sense of self, and a template not only for relating, but for understanding experience. I have referred to studies of adopted and fostered children which portray the complexity of their predicament in having internalised damaging, shifting patterns of relating.

These ideas set the background for an inquiry into whether and how meanings made intersubjectively early on, at the core of a child's sense of self, can be adapted in the intersubjectivity and emotional regulation of a psychoanalytic psychotherapeutic relationship. I will try to trace an individual development of this process in the clinical findings chapter, but importantly, it is increasingly the view from neuroscience (for example, Cozolino, 2002) that this mechanism lies at the heart of psychoanalytic psychotherapy.

In the next chapter, I will turn to the question of how to research the process of being taken into what might be termed the re-framing relationship of psychoanalytic psychotherapy.

Research methodology

Having arrived at the research question: how can psychoanalytic psychotherapy lead to better relationships for an adopted child?, there is a further question about how to investigate it.

The subject, like the practice of psychoanalytic psychotherapy itself, seems to be situated in the overlap between the worlds of science and art. In this chapter, I will consider the process of researching the science of the art of psychoanalytic psychotherapy. I will try to give an overview of current thinking about how to study the process of intersubjectively making meaning.

There are assumptions about the nature of subjectivity and objectivity, about meaning-making and causality, indeed about the nature of research and of scientific enquiry, that inevitably arise in a consideration of individual clinical work, and they will need to be interrogated as part of this study. This is all the more interesting and necessary given the nature of psychoanalytic psychotherapy, explicitly aimed at exploration of unconscious processes and subjective, intersubjective and intrasubjective connections and meanings. It raises the question of how best to study the process of co-constructing meaning that is involved in psychoanalytic psychotherapy.

Whittle's (1999) paper on what he calls a century of misunderstanding between experimental psychology and psychoanalysis explores the view that psychoanalysis is incompatible with research, because of its focus on meaning. However, here, I would like to consider whether, in the light of the neuroscience and child development research mentioned above, it is possible to see objective study and subjective meaning-based explorations not as mutually exclusive, but as mutually reinforcing; each contributing in an integrated and complex interaction to an understanding of the psychoanalytic process. I will explore ideas about objectivity, subjectivity, and intersubjectivity in the research process, touching on the nature of perception and memory. First, though, I will set this discussion in the context of some current approaches to qualitative research in the study of clinical practice - quantitative approaches being outside the scope

of this enquiry. These qualitative models are broadly phenomenological and hermeneutic, namely grounded theory, Interpretive Phenomenological Analysis (IPA), thematic analysis and theoretical sampling.

Phenomenological research in general does not seek to produce an objective record, but is centrally concerned with the attempt to get as close as possible to an understanding of what the experience means for the person involved in it. It assumes with Husserl (1970) that there could be a pure experience, away from personal bias or suppositions. Giorgi (1985) outlines two stages in this research process, the initial level of 'naive' descriptions obtained through open-ended questions and dialogue, and a subsequent level in which the researcher abstracts the general structures of the experience based on interpretation of the research subject's account.

The grounded theory model (Glaser & Strauss, 1967) is predicated on the study of data generated during the research process, from which a theory emerges about the nature and meaning of elements of the experience for that particular person or group in that particular context. The data is carefully analysed, coded sentence by sentence or phrase by phrase, categorised and compared, and through this process a theory is constructed (Strauss, 1987). This approach differs from a purely phenomenological model in that it seeks constant comparison between a range of data sources, to challenge the emerging theory and ground it in evidence.

In studying clinical practice, this method has the advantages of attending to the process, and of recognising the influence of social context. It also involves awareness of inter-relation between elements of the research data. Its central premise is that it 'is an inductive process: theory must grow out of the data and be grounded in that data' (Addison, 1989: 41). One potential drawback, however, is that no theoretical attention is paid to examination of the subjectivity of the researcher, so that it does not allow for the resource of the researcher's emotional responses as information about the subject's experience.

One method which does use this resource is IPA, which is similarly concerned with trying to understand lived experience, but with a focus on how participants themselves make sense of their experiences. IPA recognises the researcher's active drawing on their own conceptions in the process of interpretation. In connection with this, I will turn briefly to hermeneutics, the theory of interpretation, in which 'the emphasis in qualitative research is on understanding and interpretation as opposed to explanation and verification' (Kinsella, 2006). It is a research method which aims to locate experience in a social, historical and linguistic context, and is open to dialogue and ambiguity.

In a thought-provoking paper on clinical medicine as a hermeneutical enterprise, Leder (1990) argues that the practice of medicine involves the interpretation of the 'text' of the ill person. He further suggests that in 'seeking to escape all interpretive subjectivity, medicine has threatened to expunge its primary subject - the living, experiencing patient' (Leder, 1990:9).

It is my contention that the living, experiencing researcher is at least as much part of the picture for the study of clinical practice; an important resource in the study of psychologically-based interventions. I have mentioned and will later draw further on findings from neuroscience which indicate innate neurobiological and emotional resonance, and will shortly turn to psychosocial research models which embed this key factor in their approach. However, I will now describe two other models that are informed by both phenomenological and hermeneutic viewpoints: thematic analysis and theoretical sampling.

Thematic analysis is linked to phenomenology and to hermeneutics in that it seeks to code the experience of the subject, in order to understand it. An open-ended account from the subject is examined for patterns, through a careful process of familiarisation with the data, to generate first codes and then themes which carry meaning for the subject. In this model, researchers explicitly acknowledge bias, and often write reflexive memos alongside the coding process in seeking themes. In this way, it seeks to bridge the concepts of subjectivity and objectivity. It 'allows researchers to combine the richness and

uniqueness of qualitative information and the precision and discipline of quantitative methods' (Boyatzis, 1998:xiii).

Theoretical sampling, on the other hand, is not seeking a bridge to a precise kind of objectivity - rather to the emergence of something complex, developing over time. It involves ongoing interrogation of the material as a way of generating and developing theoretical ideas, rather than producing findings that are representative of a population or intended to test hypotheses. Throughout the process, the researcher is responsive to the data in developing theory, rather than establishing concepts before the research begins. At various points, the researcher asks what aspects of the data are worth investigating next in order to develop aspects of the theory that emerge through the data. In this way, conceptual connections are made through theoretical and also clinical sensitivity. Corbin and Strauss describe the circular process, in which:

Analysis begins after the first day of data gathering. Data collection leads to analysis. Analysis leads to concepts. Concepts generate questions. Questions lead to more data collection, so that the researcher might learn more about those concepts. (Corbin & Strauss, 2008:144)

This circular process is reflexive, in that the learning is reflected upon as data to offer possible new lines of enquiry. It is concept-driven, but also experience-driven, allowing for responsive revision in the light of new insight.

Having outlined some contemporary approaches to qualitative research, I will now discuss the nature of this particular investigation.

Studying intersubjectivity

The idea of being taken in as it arose in sessions linked in my mind with the ideas I have outlined above from psychotherapy with adopted children, psychoanalytic thinking, child development research and neuroscience about the formation of a child's internal world, developing in relation to the internal and external world into which the child is taken. This reminded me that the

psychotherapeutic relationship is itself a frame of reference into which the child is taken, and in relation to which they are understood. Essentially, psychoanalytic psychotherapy could be understood as investigating the first of these two relationships in the framework of the second: in effect, perhaps, ongoing theoretical sampling.

This study is an attempt to offer the results of this process for consideration, and it involves a paradox, inherent in the notion of collecting and interrogating the clinical data of a relationship in which one has oneself participated. Is it possible to be both inside and outside the relationship? There are ideas in psychoanalytic thinking about the third position, creating triangular space which may help facilitate this process. Britton (1989) writes about his own need in working with disturbed patients for 'a place in my mind that I could step into sideways from which I could look at things'. He found that the only way of doing this that was not disruptive to the patient was to 'allow the evolution within myself of my own experience and to articulate this to myself, whilst communicating my understanding of the patient's point of view' (Britton, 1989:92).

This seems to me to convey more depth than is intrinsic to the linear triangle. It suggests to me that Britton envisages the world of the patient within the world inside his mind. He can step into the internal world of the patient as conveyed by the material and its emotional qualities, and also step out of it while still containing it in his mind. It is well-established that supervision also helps to create a reflective consideration from another point of view. My work with Dan benefited from supervision in general and specific ways, offering another stage of re-framing, another world view.

However, I want in this section to go back a stage and consider ideas about conveying the two-person process as it happens, before there is a chance to reflect on it. Is there a moment before Britton's sideways step, that might constitute the raw data, as it were, upon which this study is conducted? In thinking about an appropriate research methodology, I would like to consider this question more fully, as it seems to me to be central to this study and to the wider notion of research into psychoanalytic encounters and their efficacy.

The 'raw data' of a psychoanalytic encounter: the nature of memory and perception

What we have to go on in discussing a psychoanalytic encounter is an account of what happened in the room, to the best of the knowledge of the person giving the account – in this case, me. The parameters of the raw data may be considered to be bounded in space and time by the limits of the session room and hour: what happened in the room during the session. However, there is a difficulty in that we do not have access to the entirety of what happened in the room, or even to an objective account of it in all its fullness. Even the most thorough account necessarily makes omissions – for reasons of time and space, but also importantly because of not being able to notice everything. After all, even a camera has a point of view, and furthermore, filming someone in a psychotherapy session is not neutral. The account is thus inevitably selective – what happens is seen through the lens of my experience. In effect, the account I give can only serve as a snapshot, more or less reliable depending on the qualities and breadth of my own experience.

As any police person collecting evidence will acknowledge, it is not possible to know absolutely what happened in the room. Different witnesses to an accident or crime give different accounts of what happened, even to the extent of disagreeing about physical details with some impact, like the colour or speed of a car, say. Furthermore, they will be influenced by the point of view of another person. For example, Loftus and Palmer (1974), in their studies of eyewitness testimony, found that the way in which questions were framed influenced participants' answers. In recounting the speed at which a car travelled in a short film, participants were twice as likely to report a faster speed if the question used the verb 'smashed' rather than 'made contact'. They were also more likely to report a faster speed if a question was asked about broken glass, even though there was no broken glass in the film. The words 'smashed' and 'broken glass' seem to have suggested a frame of reference involving greater speed, and respondents reported speeds commensurate with the picture evoked in their minds by these words, rather than the picture they saw on film. This

suggests to me what social animals we are, and how mutual is meaning-making; the respondents seem to be consciously or unconsciously looking for common ground with the researcher.

Even early studies of memory (Bartlett, 1932) demonstrated that memory is not a static storehouse of traces, but instead forms and reforms in dynamic relation to context and schemata of experience. Bartlett described remembering as a constructive, and re-constructive process; relative, not absolute. We might add from the evidence above that it is a co-constructive process. Bartlett also established that awareness is not necessary for memory. It seems that we unconsciously try to fit past events into our existing representations of the world, making the memory more coherent so that it makes more sense for us.

More recently, Pally (1997) explains the construction process of memory in wiring in emotional experience, in which 'the hippocampus-frontal index joins together the individual sensory features, time and place of the experience' (1997:1229), so that emotional, geographical and other aspects are linked together, and potentially triggered later by association.

However, even if we accept the analogy of the relatively neutral albeit selective camera, my question is, is it possible to separate the picture from the camera angle, or from the frame? Bartlett's studies and Pally's research would suggest not. Furthermore, I wonder if the camera angle, or the process akin to a viewfinder window through which we choose and frame the picture to be taken, in which we select from all the plethora of available minutiae what to focus on, inevitably affects how the child is thought about, and therefore affects the relationship? Putting it the other way round, does how we think about a child affect what we can think about? I will look in the next section of this chapter at studies of social attitudes affected by metaphor which suggest that this is so. But here I would like to ask, do we notice the behaviours that make most sense to us in relation to an idea already in our minds, a preconception? There is evidence to suggest that this is so. The brief awareness test currently available on the internet involving counting basketball passes, in which a gorilla dances

across the visual field unnoticed, demonstrates that it is surprisingly easy to miss something you are not looking for.

This affects the notion of 'raw data'. The briefest skim through studies of perception (see Merikle, 1998 for a review) tells us that even the most basic visual perception is shaped by what we 'know'. For example, where there is light shining on two angled white panels, a light meter would read that one side of the panel is white and that the left side is gray, being more in shadow, yet our visual systems interpret them both as white. Our eyes compensate for ambient lighting, so that under almost all conditions the colours appear stable (Greene et al, 2001).

Perceptual experience is thus not just a function of what hits the eye, it is a function of the inter-relationship between what comes in from the outside world and the central nervous system. Furthermore, it is interpolated by inter-relationships within the brain: interneurons convey messages between the sensory and motor neurones and in fact make up the main body of the brain. The conclusion of a study of conscious and unconscious perception was that 'Perceptual processing itself is unconscious and automatically proceeds to all levels of analysis and redescription available to the perceiver' (Marcel, 1983: 197). Marcel suggests that his findings cast doubt on the assumption that there is an equivalence between what we see and what is there.

For the purpose of this research enquiry into the feeling of being taken in, in its various senses with their contradictory connotations, this information is central. The question of what is the raw data goes to the heart of the subject, especially given that we are considering an experiential process. The studies mentioned above would seem to imply that 'raw data' can only ever be taken into the mind in a relational way. The same question can be expressed in terms of neuroscience: how would it be possible to filter out the 'actual' object from what we perceive, if not through the visual systems which interpret in relation to other parts of the brain formed in relation to experience?

I have earlier touched on some ideas about the relationship between what is being taken in and what it is taken into in psychoanalytic thinking. I would now like to point to more mundane evidence of how influenced we are by how relating is framed in the mind of the other.

In his tricks on the public, the magician Derron Brown makes much use of subliminal suggestion. He is able in subtle but simple ways to influence choices made by his subjects, in ways of which they themselves are unaware. He has implicitly signalled the behaviour he expects to elicit. For example, an advertising campaign was influenced by the people who conceived it having been driven past specific motifs which were then included in the campaign (Channel 4, 2012). A 'neutral', potentially open task, of writing an advertising campaign, was shaped by the experience leading up to it. There is no reason to suppose that we are not influenced in other relationships in similar ways, particularly but not only in our primary early relationships, in which we are discovering how the world works and what is our place in it. In evolutionary terms, this makes sense. Bowlby described how an infant needs to and does adapt to his or her social situation through taking in the implicit rules of engagement, in an ongoing, dynamic process (Bowlby, 1969).

Arguably any study therefore needs to acknowledge then that there is no such thing as neutral raw data; that the very act of perceiving is not neutral but happens in relation to expectations drawn from experience, and is revised in memory according to new circumstances. Returning to the study of psychotherapy, it is clear that the relationship itself inevitably frames and shapes the meaning attributed to the encounter. This implies that data offered for consideration would need to include some indication of context as well as content; for example, clinician responses and attitudes as well as those of the child. The Tavistock Infant Observation model, introduced by Bick in 1948, is one research model which records context and observer emotional responses along with external observations. I will return to discuss this approach further, but it is a noteworthy example of a model which sees the infant and indeed the observer, as acting in and acted upon by the context.

Ainsworth and Bell's work on the Strange Situation (1970) also captured the subtleties of dyadic interaction in observational measures that took into account both content and context. It is noteworthy that the context has an effect. This is not necessarily used consciously, as it is in advertising, although that field is a substantial body of evidence in favour of the experience of form and content being relational rather than absolute. For example, in Dichter's (1964) experiment, the colour of a coffee can affected participants' experience of the strength of the coffee it held. The same coffee from dark brown, red, blue and yellow cans was variously experienced by most respondents as too strong, having a richer flavour, having a milder flavour, and being too weak. In another example of the experience-affecting, sense-making properties of cues about context, Pilditch (1973), writing about marketing, explained how the picture of a spoon on the packaging of a baking product was an implicit cue that made it possible for the housewife to mentally rehearse the use of the product while it was still on the shelf.

It is interesting to note that long before the days of advertising, and of McLuhan's (1964) ideas about the medium being the message, Freud was careful to formulate his interest in the workings of the mind in scientific terms. There are signs that Freud's contemporaries, Jung and Ferenczi, wanted to explore the wilder shores of spirituality, and Freud in private letters (1911) seems to have shared their interest. However, what he wrote for public consumption in his Project for a Scientific Psychology (1895) was framed squarely in terms of objectivity, of causes determined by neurophysiology. There may be a parallel with the National Institute for Health and Clinical Excellence guideline project, which seeks to objectify excellent clinical practice, in order to spread it more widely - and possibly, speed it up. In the attempt, it may be that the effort to sound 'scientific' means that the relational and the emotional are overlooked. The very word 'clinical' implies a cool detachment, as if it would need to exclude the emotional, the subjective. However, it is increasingly clear that our neurophysiology is objectively intrinsically relational, and furthermore, that our thinking is predicated on emotion (Damasio, 1999). The two worlds of science and emotional relationship are perhaps not as far apart as they seem.

Choosing a frame of reference for a piece of writing involves constructing a world view, in which some attitudes and possibilities are seen as relevant and meaningful, and others are excluded. The prevailing world view of the idea of science has been an emphasis on the idea of objectivity, and on separation between observer and what is observed, which ironically does not stand up to scientific scrutiny. The philosopher Midgley's review of Sheldrake's book, *The Science Delusion*, suggests that we need 'a new mind-body paradigm' that acknowledges human beings 'as the active wholes they are', in order to approach 'important mind-body topics' (2012:7).

Framing the discussion of a psychoanalytic encounter

McGilchrist suggests that 'conventional neuroscience, being itself largely a manifestation of left hemisphere activity, has focused so much on what the brain is doing in each hemisphere, thus in my view, missing the significance of what it was trying to understand' (2010:93). He questions whether this approach could be read 'as the misapplication of language – in other words, the faulty procedure of seeking truth by standing in the world of the left hemisphere while looking at the world of the right' (ibid: 89).

The insight that the language we can use limits the thinking we can do, and vice versa, lies at the heart of psychoanalytic wisdom, and applies of course every bit as much to the discussion of psychoanalysis as it does to any other conversation. The parameters of a discussion are set by the choice of terminology. Thibodeau and Boroditsky's (2011) work on the relationship between language and responses to crime shows how the contrasting use of 'virus' and 'beast' metaphors for criminal behaviour elicited very different subject responses. They noticed that, once even a single word metaphor was introduced, people used it as a governing concept, and made frame-consistent inferences. Interestingly, they found that the influence of the metaphorical framing effect was covert, working implicitly.

Thus the way in which we describe what happens affects what we think and feel, subliminally. Damasio writes that 'an important consequence of the

pervasiveness of emotions is that virtually every image, actually perceived or recalled is accompanied by some reaction from the apparatus of emotion' (Damasio, 1999:58). What he says suggests that it is not possible to separate out perception, memory or thought from emotion. In being scientific, we cannot avoid either the emotional or the relational. The very fact that Freud thought it best to construct his enquiry in a medico-scientific way may show a canny understanding of the effect of the framing relationship. Perhaps he was aware that his project may be better received if couched in terms of the scientific.

However, there are scientifically validated studies of this inter-relation, involving the duality and mutuality of meaning-making. Schore (2009) writes powerfully about the paradigm shift in the mental health field, involving an 'ongoing dialogue with neighboring disciplines, especially developmental science, biology, and neuroscience'. He sees 'this mutually enriching interdisciplinary communication' (2009:112) as centred on a common interest in the primacy of emotion.

Schore's work makes a specific connection between neuroscience and psychotherapy. Addressing the science of making meaning, he explains that the orbitofrontal system involved in emotion-related learning retains plasticity throughout life. This, he writes, 'may help us understand how affectively focused psychotherapy can alter early attachment patterns' (2003: 69). Thus, importantly for psychotherapy, it seems that what we take in early in life may be influenced by later relating. He outlines the science of relationship, explaining how relating forms or alters mind and emotion. The neurophysiology of emotion and meaning-making is intrinsically relational, not independent. This has a direct bearing on the theme of this thesis. Whatever meanings are ascribed by children to their own losses and separations are created in relation to the behaviour of and feelings conveyed by their caregivers. Can these meanings made intersubjectively early on, at the core of his sense of self, be adapted in the intersubjectivity and emotional regulation of a later relationship? I will try to trace an individual development of this process in the clinical findings chapter, but importantly, Schore points out that it lies at the heart of the psychotherapeutic endeavour, suggesting that current studies of the

unconscious domain not only support a clinical psychoanalytic model of treatment, but can furthermore 'elucidate the mechanisms that lie at the core of psychoanalysis' (2010:177).

He explains the way in which child and therapist communicate unconsciously, alongside conscious explicit attention to what is said and done, 'listening and interacting at another level, an experience-near subjective level, one that implicitly processes moment-to-moment socio-emotional information at levels beneath awareness' (2010:184).

Schore thus offers the science illuminating the intersubjective process of unconscious communication, in the making and the taking in of meaning available to the patient's implicit sense of self, specially located in the right brain, which is particularly active in psychoanalytic psychotherapy. 'Indeed the implicit functions and structures of the right brain represent the inner world described by psychoanalysis since its inception' (2010:179).

Earlier, I touched on the evidence for the clinically observable concept of intersubjectivity in child development research; for example, Braten's research confirming the presence of a predisposition to not only relate to but be moulded neurologically by a 'virtual other' (Braten, 1988). Trevarthen's work (1993) on intersubjectivity with mother-infant dyads bears this out, and suggests that the mutual resonance between infant and mother allows for the regulation of positive affect brain states.

This regulation is transformative. 'The baby's brain is not only affected by these transactions, but also its growth literally requires brain-brain interaction and occurs in the context of a positive affective relationship between mother and infant' (Schore, 2003:42). The significance of this for children who have suffered disturbing early relationships is profound. They have not experienced the emotional regulation that facilitates healthy brain development.

Furthermore, Schore elucidates the process by which the infant's right hemisphere, dominant in non-verbal communication, uses the output of the

mother's right hemisphere 'as a template for the hard-wiring of circuits in his own right cortex that will come to mediate his expanding cognitive-affective capacities to appraise variations in both external and internal information' (2003:44). Thus the mother's state of mind is not only the climate in which the baby's mind develops, it also establishes the navigation system by which the child will predict what is likely to happen in the world. It becomes the way we see the world in which we live.

Intersubjectivity, then, the mutual resonance and regulation of physical/emotional states, is discovered to be the neurobiological mechanism by which the brain and mind develop. The implications for intersubjectivity as the mechanism of change in psychotherapy are clear. Indeed, Schore's work places this process at the heart of psychotherapeutic effect. He explains that the right brain plays an important part in the process of psychotherapy, its role offering:

a model of implicit communications within the therapeutic relationship, whereby transference-counter-transference right brain to right brain communications represent interactions of the patient's unconscious primary process system and the therapist's primary process system (2012:182).

In their work with mother-infant pairs, Beebe and Lachmann (1988) observed a mirroring sequence, synchronous rapid movements and mutually responsive affective expressions, happening literally moment by moment or faster. Schore writes, 'the fact that the co-ordination of responses is so rapid suggests the existence of a bond of unconscious communication' (2003:38).

The existence of a bond of unconscious communication, scientifically validated and bearing on the development of mind and emotional processing, seems to offer a link between the apparently polarised camps of objectivity and subjectivity. Alongside the empirical facts in Schore's painstaking research and (1994) comprehensive review, the use of functional magnetic resonance imaging (fMRI) of the brain is perhaps as empirical as it gets in this area.

Importantly, recent studies using the fMRI technique have found mirror neurons in the human brain that fire in the same region when witnessing an action performed by someone else as when the subject performs the same action (for an overview, see Rizzolatti & Craighero, 2004). This suggests that intersubjectivity is not only an emotional and mental process, but bodily-based as well - essentially, 'limbic resonance based on activated mirror neurons' (Balbernie, 2007:312).

Furthermore, 'premotor mirror neuron areas - active during the execution and the observation of an action - previously thought to be involved only in action recognition, are actually also involved in understanding the intentions of others' (Iacoboni et al, 2005:1). Hume's (1751) predictive relationship, whereby an effect can be deduced from a cause, is in evidence here. Mirror neurons will fire in someone observing an action, even in anticipation of observing an action, more strongly when there is a clear context for the action witnessed. These child development and neuroscientific studies seem to bear out the view that non-verbal intersubjectivity - unconscious communication - is a scientifically verifiable process, crucial in the development of meaning, which is inferred from the context.

So we have scientific proof of babies learning to process the world and their responses to it through mutual attunement with a caregiver, of the human mind and body prone to feel what another feels on witnessing an action, even on anticipating an intention, and furthermore, we have studies of visual perception which suggest that what we see is subjectively determined by what we already know. Barlow writes, 'It is a mistake to consider perception and learning separately because what one learns is strongly constrained by what one perceives, and what one perceives depends on what one has experienced' (1990:1561). The contemporary neuropsychologist Gregory goes so far as to say: 'There are increasing discrepancies between perceptions and conceptions with science's advances, which makes it hard to define "illusion"' (1997:1121). Thus we cannot be sure what we see - all we can do is feel our way in the light of our experience.

It becomes apparent that processes dependent upon the notion of objectivity, such as scientific research, cannot avoid the subjective, inevitably relying as they do on perception. Meanwhile the significance of subjectivity is objectively supported by an increasing body of evidence, including fMRI scans. It seems to me that many of the central tenets of psychoanalytic thinking - including the central one of the unconscious itself - have been borne out by the studies I have touched upon, so that the polarity between research framed in terms of objectivity and more subjectively-focused meaning based studies begins to seem reductive. There is evidence of biological cause and effect in the making of subjective meaning. For example, Schore's work makes the specific connection I have already mentioned between neuroscience and the intersubjective process of psychotherapy.

Woody and Phillips' (1995) revision of Freud's Project for a Scientific Psychology suggests that it may now be possible 'to form a notion of the unconscious that is clinically formulated and neurophysiologically grounded'(1995:123). There is a caveat: in parallel with Ricoeur (1970), they warn against thinking of the psychodynamic unconscious as ruled by linear logic, and suggest that instead there is complexity. They use the analogy of an internal 'unruly crowd of interacting meanings' (Woody and Phillips, 1995:123), bringing to mind Adam Phillips' (1995) model of the analyst as host, making introductions to the uninvited guests of the patient's unruly or bizarre disowned unconscious.

This view is supported by Wittgenstein's Philosophical Investigations (1953), in which he warns against trying to tie meanings down in words, and so make difficulties that do not exist in the course of experience. His wisdom seems to suggest the relation between left and right hemispheres of the brain, in which the left brain continually works to find a template, a boundary, an explanation, for the right brain's inflow of experience as it is felt in the moment.

My aim in this section has been to explore the limitations of the view that there is a polarity in research approaches between objectivity and subjective meaning. Indeed, there seems to be a fruitful and fascinating dialogue between the two.

Beebe and Lachmann's (1988) mirroring sequence and Schore's (2003:38) bond of unconscious communication show that our physiology works towards making meaning, intersubjectively, although it may forever elude us, and this has a parallel with psychoanalysis, and the study of psychoanalysis.

To sum up, I will end this section with McGilchrist's clear-sighted observation about the shaping function of attention:

If what it is that exists comes into being for each one of us through its interaction with our brains and minds, the idea that we could have a knowledge of it that was not also an expression of ourselves, and dependent on what we brought to the relationship is untenable. (2010:37)

Scientific observation and the observational method

For if you look at them you will not see something that is common to all, but similarities, relationships, and a whole series of them at that. To repeat: don't think, but look! (Wittgenstein, 1953, aphorism 67)

Wittgenstein's injunction not to think but to look seems to prefigure McGilchrist's work on the two hemispheres of the brain, with their very different roles, purposes and attitudes to knowing. McGilchrist describes the left hemisphere as favouring analytic, sequential processing, seeing knowledge as a picture built slowly, piece by piece out of factual 'certainties'. The right, on the other hand, he portrays as getting to know through the flow of a relationship, 'a back and forth process between itself and other', which 'is therefore never finished, never certain' (2010: 229). He points out a huge disadvantage of this approach to experience: the difficulty of passing it on. A distinction is made between knowing about and knowing, which brings to mind Bion's (1962) ideas about learning from experience.

In choosing a research methodology for this thesis, which does entail an attempt to pass on what I have learnt from experience, I have had to grapple with this problem. It seems to lie at the heart of the attempt to find ways of writing about

psychoanalytic psychotherapy that may give its insights and therapeutic successes social and political currency. However, recent neuroscience and child development research, represented by the work of Schore, Siegel, Stern and others, offers a way forward. I have tried to show how, in the science of intersubjectivity outlined above, it becomes apparent that our psychobiology can objectively be seen to work towards making meaning, intersubjectively.

Clarke and Hoggett (2009) state that traditional models of human rationality, which opposed thought and emotion as 'reason and passion', are being challenged. They suggest that 'as ways have been sought to overcome such splits, psychoanalysis has increasingly appeared in the breach' (2009:1). They note that psychosocial studies use psychoanalytic concepts and principles to illuminate core issues within the social sciences, and inform the development of new methodologies in that field. These use a number of psychoanalytically-grounded interview and observational methods, and attend to interpersonal dynamics in the research process. The attention to interpersonal dynamics, particularly the emotion aroused in the observer, is a cornerstone of psychoanalytic thinking. It is a central feature of infant observation, which Bick (1964) pioneered as a method of researching human development to inform training in psychoanalytic practice. Its scope over the years has widened to include many other trainings. 'As an observational method that enables access to a reflexive understanding of the observer and the observed, it has much to contribute to the wider field of the social sciences' (Briggs, 2002:280).

Rustin (2002) makes the point that researchers in infant observation are looking not for sequences of linear development, but for 'ordering patterns, for the evidence of emergent systemic organization in the minds of infants and in the relationships between infants and those around them' (2002:271). He argues that looking for patterns of relating in this way better fits the complexity of the 'self-organizing system' of the human subject than a mechanistic model. He makes a link with complexity theory, suggesting that it pertains to:

a large domain of nature that is neither determined in the manner of a closed mechanism... nor wholly random...Instead, it posits self-

organizing systems, of high complexity and indeterminacy within understood limits. This domain is precisely..the world of experience with which clinical psychoanalysts continually struggle and which (infant) observers encounter. (2002: 278)

Hollway (1989) looks at observational methodology as a way of enhancing the objective use of subjectivity. In her research into the psychosocial, she puts forward the view that neither the material nor the psychological world precedes the other; instead they are co-produced. This is evidenced in the studies of perception touched on above, and links with the idea of intersubjectively co-constructed meaning that is the basis of the framing relationship from birth. The link suggests that choosing a similar method may give a deeper insight into the process under study; it will itself be an experience of the phenomenon observed. In McGilchrist's terms, this would seem to offer a way of letting the left brain, with its explicit, purposeful, categorising drive, look at the right, with its more holistic, implicit awareness.

In a foreword to Urwin and Sternberg's (2012) book *Infant Observation and Research*, Hollway writes of finding in infant observation a research method that:

put the relationality of the infant and infant's carer(s) at the centre of the paradigm and could preserve the social setting at the heart of the research encounter...Here was a method that taught a way for observers to cultivate objectivity, not in the positivist sense of the word, but in the sense of paying attention to their emotional responses and noticing when, where and how these informed their understanding of what they were observing. (2012:1)

It seems to me that an observational method bridges the concepts of both objectivity and subjectivity: offering therapist-observed, necessarily subjective, interactions between child and therapist for consideration. An observational approach therefore seems apposite for this study, especially given that I have had the training in writing detailed retrospective notes that the infant observation entails, in order to allow the important resource of the therapist's emotional responses to be used as information about the therapeutic encounter. This method offers scope to make more explicit the process of intersubjective, often

implicit meaning-making in the therapeutic relationship. It allows me to seek Rustin's (2002) 'ordering patterns', rather than linear developments, which seem to better fit the complexity of the material under study.

A further reason for choosing an observational method was that it also offers a reflexive means of studying the studying, a way of taking Britton's (1989) sideways step into 'a place in my mind... from which I could look at things'. This helped to avoid being taken in myself, in the deceptive sense of the phrase, through the lack of another world view. It offers, potentially, a re-framing process, to enlarge the scope of the possibilities, just as the clinical experience aims to do, with the benefit of supervision adding another perspective, another world view.

I offer a caveat, along the lines suggested by Braten in introducing his idea of the virtual other:

I have tried to avoid the fallacy of what Whitehead terms "misplaced concreteness". In this I may have failed. What we capture by way of scientific data reflect our own co-constructions and mediations in the language at our disposal. (Braten, 1991:2)

The theoretical sampling of clinical data draws on process records written immediately after sessions. These include my own emotional responses, and the process of writing them down affords a reflexive step outside the frame of the encounter in which the emotional responses were evoked. In selecting material from the record of 405 sessions gathered during just over three years, I chose that which best represented the theme of being taken in as it developed, balancing this with a need to spread the selection over the course of the psychotherapy, in order to chart changes. From the group of sessions which pertained to the theme of being taken in, I chose 18 key sessions, with occasional references to other relevant material, sampled from the beginning, the middle and the end of the three year period, to reflect Dan's developing use of the therapeutic relationship at different stages. Occasionally, I have chosen sessions which are close together chronologically, to trace a particular motif as it develops and accrues different meanings - for example the hide and seek

series, which happened at about the middle point of the therapy - but otherwise they are spread more widely, to represent stages in the work. At less than 5% of the overall number of sessions, 18 may strike the reader as a relatively small proportion. However, like Blake's (1803) world contained in a grain of sand, it was fascinating to realise that each session contained Dan's internal world, represented in different ways, but recognisably containing the issues he continually struggled with, week in and week out, over the course of three years. It may be true to say that the issues were the same towards the end of therapy too, but I hope to show that the way in which he was able to process them had developed.

My overall aim in choosing which sessions to draw upon for detailed study was to try and trace Dan's far from linear development. This led through phases in which he had to take me into his world through emotional resonance, towards phases in which there was the possibility of his feeling safe enough to venture out into the new world of the therapeutic relationship, which I hoped he would internalise as a new internal working model for future reference.

Ethics

Before turning to the clinical findings, I would like to address the important matter of ethics. In planning the research, I had to think about how to protect Dan and his family's safety, dignity and wellbeing. I gained preliminary consent in principle at the beginning of treatment from Dan's parents, as I did from all parents of my child patients, for potentially writing about my learning from this work. However, it seemed important to wait until the therapy was finished before asking for informed consent for the thesis I was considering writing. I thought the request might introduce an unwelcome element into the work. Given Dan's ambivalence and suspicions about my interest in him, which will shortly become apparent in the clinical findings, I felt it would be profoundly unhelpful to ask for permission while the work continued. It did mean that I had to wait longer to be sure of being able to write about my experience of working with him, but I felt it was important therapeutically that the family gave permission (or not) freely after the therapy had ended. In fact, Dan's mother was enthusiastic about my writing

about the case, and felt that any light that could be shed on the complex difficulties of adoptive families' experience would be very helpful.

I have, of course, anonymised the material, and tried to remove any references that might identify Dan or his family, other than those that they themselves would inevitably recognise. This was in accord with the approval given by the family, in line with workplace and Tavistock Centre ethical guidelines on consent.

However, I have tried to convey something of the essential, inimitable Dan.

Research findings: clinical material and commentary

Bearing McGilchrist's (2010) words about the fundamental importance of the shaping role of attention in mind, I will now turn to the research findings: clinical material from sessions. Inevitably, what came to mind for me in Dan's sessions and was recorded afterwards, was in interaction with my brain and mind, and will necessarily be an expression of my experience, and dependent on what I brought to the relationship, as well as on what Dan brought.

In the previous chapter I suggested that an observational method might bridge the concepts of both objectivity and subjectivity, including the emotional responses of the observer and so opening up a third perspective on the two-way relationship. The observational method thus offers a perspective on the subjective and the implicit, with a view to making it explicit. I therefore explicitly include my own emotional responses to the material. I will offer my reflections after the event, as I processed the emotional information in my own mind, in an attempt to understand the meaning of it in order to share it with Dan, verbally or not.

In this chapter, then, I would like to follow two strands of enquiry through the material offered, tracing both implicit process and explicit content. I hope it will be apparent that implicit process gradually became more available for explicit comment as the relationship developed. This reflexivity seems to me to be the particular gift of psychoanalytic psychotherapy, with its explicit focus on the transference of qualities from the early template onto the relationship with the therapist.

First, I offer what follows as an example of what is in everyday life the implicit process of meaning-making - how our psychobiology can objectively be seen to work towards making meaning intersubjectively in this one case. Second, I will try to understand more about what that particular meaning might be, in relation to the theme of being taken in, with its contradictory connotations. This second strand intertwines with the first, for fears and doubts about being taken in inevitably involve and affect the intersubjective process - the very mechanism of

potential change, as we have seen. This had implications for Dan's progress in psychotherapy, and would seem to apply for other adopted children, too. These implications will be the particular focus of the following chapter, in which I will evaluate the clinical findings.

As I explained in the previous chapter, I have selected themes from the wealth of material in thrice weekly sessions with Dan over a three year period, which seemed to me to carry meaning particularly relevant to the theme of being taken in. This theme was chosen because it seemed to me to encapsulate something of the central dilemma for Dan and for other adopted children - and indeed for those around them who want to help them develop - how do you take in something new, when the taking in process is compromised or damaged? The process of intersubjectivity outlined in the literature review necessitates a mutual openness, which, to a child like Dan, feels dangerous. Talking or acting as though it is not dangerous fails to resonate with his embodied experience; talking or acting as though it is, risks triggering post traumatic stress symptoms. Putting the absence of openness together with a wired in and well-grounded suspicion of relationships seems to preclude the possibility of growth and change, because as we have seen in earlier chapters, the very mechanism through which brain and minds grow in normal development, and change happens in psychotherapy, is through relating, especially emotional resonance and regulation. The feeling of being taken in deceptively, with its deeper underlying current of feeling unable to be taken in, affects this process, and so could mean that change cannot happen. The 'beaten dog' part of the adopted child stays outside the therapeutic relationship. This may feel safer in some ways, but it also means it cannot be looked after and helped to heal - in actual fact, it perpetuates the neglect. I hope in what follows to trace the process of intersubjectivity between Dan and me as his therapist, through the theme of being taken in, which highlights this central problem.

I will outline key strands of material here, which powerfully represent the various qualities of Dan's assumptions about being taken in, before giving and discussing notes from sessions in which these strands of material were particularly evident. These key strands were:

performance and imaginary worlds

There was a strong theme of performance in Dan's sessions, as I mentioned in the Introduction, often involving a waiter-chef, gymnast or stuntman, examples of which I will offer for consideration. I will investigate the complex qualities of the 'show' for Dan, especially in relation to making meaning. His shows involved an element of theatricality, creating an imaginary world into which I as audience was taken. I will particularly focus on car world, a magical, rather glamorous but ruthless world, in which nobody cared about anyone else and no-one got hurt, though there were many smashes and crashes.

hiding and making dens

A game of hide and seek ran throughout our work together in various ways, some more extreme than others. I will try to draw out the range of very different emotional qualities evoked by these. The making of a den also played a significant role throughout the three years, with themes to do with seeing and being seen, sometimes involving infantile feelings and the explosive quality of endings. Again, I will try to elucidate its various functions and attributes in relation to the feeling of being taken in.

the badly treated dog

This motif gained increasing significance during the later phase of our work together, and accrued symbolic complexity. As I will try to show, it seemed to represent neglect and abuse, at times revenge, and something close to vindication, and eventually the possibility of different kinds of transformation.

I would like to add a caveat here: although the content carries meaning, it was a vehicle for the emotional qualities of the process, so that perhaps whichever material I chose would have conveyed Dan's ambivalence about the prospect of being taken into relationship.

I organise the clinical material thematically and chronologically, so that particular strands can be traced as they developed, and meanings gathered around them in our relationship. However, it will be apparent that there was not a sense of linear progression. In fact, these themes spiralled in and out of many sessions, and were re-visited at intervals, at different times intensely, protractedly, or fleetingly. Alongside the explicit content of the material, there was, I think, a progression as the therapy developed, towards bringing the implicit qualities of the encounter into focus, which initially I found very hard to do. Perhaps it was only after quite a prolonged immersion in the new language of his world that I could really 'tune in' and listen to him without losing my perspective, and thus be both receptive and reflective, bringing his world into relation with mine. I will return to this idea and link it with research into 'communicative musicality' (Malloch & Trevarthen, 2008) in the evaluation chapter.

I am occasionally able to give potential external influencing factors, like the time of a birthday. Dan did not tend to tell me much about the external world context which may have triggered some of the extreme states of feeling that surfaced in sessions. I was in regular contact with the parent worker, though, and so did hear about some of the outside world events that may have preoccupied him. This helped me make potential connections, even if only in my own mind, in my attempt to understand his experience and try to convey something of that understanding to him. Interestingly, this process seemed to be a necessary precursor to his imagining new possibilities.

In the session material that follows, I will give some context, and use italics to denote session material quoted from notes written immediately afterwards.

Performance: 'the lady can't see it'

From our very first week of working together, there was a feeling of confusion, and of 'mis-steps in the dance' (Stern, 1977:133). The element of performance, or the presence of a show seemed to be connected to this confusion. In session 3, having put first police cars and then pots and pans instead under the chair opposite me, Dan talked over my mentioning this replacement, and began to wait on me. I was served in the most elaborately graceful way imaginable. It turned out that he was the hardworking chef too, getting up at one in the morning on his day off to start breakfast:

He told me I was going to come for breakfast, lunch and tea. Any comments about how unfair this was, about having to wait on me, or about how tired the chef was and how hard he had to work to feed me, got the response: 'No - the lady can't see it'. I felt he wanted me to believe in the performance and not see the act – suspend my disbelief, as theatre goers are asked to do. Nevertheless, I talked about how he was busy feeding me, showing me how hard he feels he has to work when he is with someone; he had had to be a 'waiter' for a long, long time and now he had to be the chef too, and give me breakfast, dinner and tea. In describing what was happening, I could feel that I was addressing his nine-year old self and not reaching a younger part of him. He evidently did not want me to speak or stop and think, and repeatedly talked over me or jumped about if he felt there was going to be a pause. It felt confusing, as if he both desperately needed and feared my full attention.

In what Dan showed me in this session, I felt I was being asked to suspend my disbelief, as an audience is asked to do. It occurred to me that an audience is in the dark, and I did feel kept in the dark. There were things he did not want me to see, for example, the police cars watching me from under the opposite chair. It is not putting it too strongly to say I felt compelled to concentrate on the performance, on what he wanted me to see. It is hard to convey quite how vehemently, even desperately, he insisted on my not noticing what I noticed about the fact of his performance. It seemed as if he felt it would be a betrayal not to be entirely with him inside the performance. Something about his

vehemence gave me a taste of the total unviability for him of the alternative, that I might not be taken into the world of the performance with him, but be outside it.

At the time, I tried to understand this in relation to a child's early need for what Bartram (2003) calls 'twoness', to be wrapped up together without intrusion from the outside world, like a nursing couple, before being called upon to tolerate 'threeness'. It may have been that what Dan, like many adopted children, had missed of the experience of a close twoness, he was desperate for now, and furthermore, dreaded its imminent withdrawal. Bartram writes that the loss of this twoness is sometimes 'too great to be digested and therefore the capacity to tolerate a 'third position' is restricted or absent' (2003:25). She describes struggling to judge when to let her patient have an experience of twoness, and when to intervene 'to keep my own thinking alive' (ibid:24). I recognised this dilemma, and also Bartram's patient's 'grim determination to keep my mind exactly where she could 'see' it at all times', which expressed itself in my work with Dan in an oppressive feeling of being silenced.

Dan's need of twoness was very far from being realised when it was most needed, which left him unable to manage the third position of my outside perspective, because it seemed to entail a feeling of being cast out from the closeness he desperately needed. My feeling in the room corresponded to this idea - I could feel an urgent need for my full attention, on what he was showing me and on nothing that was outside that frame. Noticing that there was a performance would, I felt, have been experienced as a betrayal.

Supervision offered another perspective on the performance material I have quoted; that of Bick's (1968) teaching that the infant feels himself to be at risk of overwhelming feelings of falling forever, or of going to pieces, without adequate parental holding. She suggests that 'disturbance in the primal skin function can lead to a development of a "second skin" formation, through which dependence on the object is replaced by a pseudo-independence' (1968:56). This self-administered way of holding together, trying to self-supply what the environment lacks, is a huge and in some ways courageous effort, preferable to falling apart but born of desperation. For Dan, one function of performance seemed to be to

provide a rather two-dimensional way of holding himself together in the absence of the deeper containment of which he was deprived. Like his behaviour in early contact visits, in sessions he seemed to be trying to entertain me, while simultaneously communicating his suspicion that I was not fully available to him.

The waiter-chef performance thus seems to highlight the complexity of Dan's experience of the feeling of being taken in. The truth was that satisfactory 'twoness' had not happened in Dan's early life, and so what we were experiencing in the room, close to his own early experience, actually involved an excluded and suspicious third, who could not be brought in. This seems to link to the session material in which I was required not to notice the police cars that were lined up facing me under the opposite chair; Dan did not want me to think about what the police cars might stand for, watching me from under the chair, and swiftly replaced by serving dishes. Like a magician's audience, I was not to notice the sleight of hand. I was to see only the attempts to feed and serve me, and not explicitly notice the surveillance. The implications of this were complex. One implication was that he suspected me of wrong intentions, or wrongdoing, and the prospect of my becoming aware of that seemed to feel dangerous to him. Another was that he seemed to need me to have the experience of being under surveillance, in order to understand what it was like for him, for it had been part of his experience. Another may have been that in so far as he transferred his expectations of adults onto me, he was experiencing this feeling of being under surveillance in the encounter with me in the room. Yet in order to really have an experience of twoness, in the sense of someone seeing things from his point of view, and identifying with his feelings, paradoxically, he needed me to be able to identify with this position of suspicious outsider, and also with being under suspicion.

I was not able to find a way to talk about this communication, as I received it during the session. It felt unsayable, at the time. Likewise, talking to him about how hard he was working as the waiter, giving me the three meals of breakfast, lunch and tea, like the three sessions of therapy, felt rather forced. My comments upon what he was doing elicited his irritated remark: 'No - the lady can't see it!' My descriptions of his hard work waiting felt as though they were

aimed at the nine-year-old part of him, instead of some much younger feeling that was not being attended to. Looking back, I think it prevented us focusing on the force of the switch between police surveillance and feeding, which took perhaps the better part of the next 400 hours to really bring to awareness in our relationship in a regulated way. Back in the session, after the waiter/chef came the following material:

He got out the playdoh, cut some off and offered it to me, saying, 'Want pizza?' There was a feeling of something insatiable, and I exclaimed about how hungry this lady was. He sat on a lump of playdoh to flatten it - I thought of pooh in a nappy. He asked if I wanted a mini pizza, then rolled it up and sat on it again, squashing it down. It felt disgusting. When he asked if I wanted a piece I said, feeling that he really would not want me to say this and that I was taking the risk of rejecting him and his offer, that maybe it would be like a pooh-pizza. He looked at me with interest and smiled.

This pooh-pizza could well have been his commentary on my efforts, but it also gave me an important glimpse into a feeling of something repugnant, disgusting. I think my hesitant naming of the pooh-pizza did not go far enough. He behaved as if he wanted me to feel delight, but I felt disgust and could not name it; something nasty was disguised. It may have been helpful if I had had the presence of mind to verbalise the feeling of something hidden, that could not be spoken about. On reflection, it seems to me that he was communicating a sense of himself as a baby who was too disgusting to be taken in. Tellingly, this too was a feeling that I could not put into words; there was much that was at that early point in the work, unspeakable.

However, there may have been a value for Dan in my experiencing the real discomfort of unsayability without the release of being able to put it into words straight away. I might then have felt to him, and to myself, that I was somewhat outside the experience - had wrapped my mind around it, as it were, too soon.

Our difficulty then, was that in order to help him take in and come to terms with the truth of his experience, I had to be aware of, to take in, what he felt he

needed to exclude from awareness, as too dangerous. There was a technical difficulty in finding a way to indicate my awareness that felt tolerable to him. Meltzer (1976) has written about notions of temperature and distance in relation to this question, and Alvarez (2004) has considered ways of 'finding the wavelength'. The problem of 'making the thought thinkable' (Alvarez, 1993) was vividly present in working with Dan.

Hiding in the cupboard

I will now give notes from session 27, nearly three months into our work together, in which the qualities of the space into which he felt he was being taken in sessions became clearer.

On coming into the room, he immediately got the football out of his box and began to kick it around the room aggressively. He seemed furious, and I said that something was certainly getting kicked around. He quickly got more and more manic, sending the football hurtling against the window blinds. It felt very hostile.

There followed a conversation to do with having to miss athletics after school and looking forward to going bowling that I found confusing. As I tried to understand what he meant, and connect it to what was happening here, he was still kicking the ball around hard, hitting the ceiling, walls and blind. I had the strong feeling that my asking about it was not helping him, but neither had my sitting quietly watching. I was evidently not 'getting it'.

Then he got the marbles and started to throw them, smiling a forced and rather chilling smile as he did so. I intervened here, and he substituted playdoh. He seemed excited rather than angry now, getting carried away, and I think he would have found it hard to stop. He threw the lump of playdoh at the light, and I took it and said I thought he needed me to help him stop now, as it was getting a bit wild. I wondered if he would grab the playdoh from my hands, but he seemed to settle for a moment. He was still holding a little bit of playdoh, and he

flattened it over the lock of the cupboard. I wondered what a covered over lock might mean for him - can't get in? Can't get out? People can't see in?

He got a blanket, and put it over his head. He walked towards me in monster mode, saying strange words, then asking in a monster voice, 'Who are you?' I tried to voice his fears about who I might be, this strange lady who said strange things. I then worried that putting it into words was making it more frightening for him. Perhaps it did, for he then tried to put the blanket over my head, which I prevented. He opened the cupboard and climbed inside. I said he wanted to hide himself away - maybe it was very scary thinking about the monster. As he curled himself into the top shelf space with its hard edges, it felt horrible.

Having expressed hostility first by kicking the ball around, and then by throwing the marbles and playdoh, he shut himself in the cupboard. His initial fury may have been to do with holding me responsible for his having to come to therapy and possibly missing athletics, though this was indirectly expressed. My not getting it seems to have escalated the force of feeling, thus reinforcing a frightening sense of a monster in the room and a need to be shut away. He seems to have been communicating something about an internalised world, present in the room in the transference, in which hostility necessitates being shut away. The emotional flavour of the being shut away was complex, involving a feeling of punishment, but also of a protective impulse, though whether this was directed towards self or object was hard to distinguish.

Looking back, I think an important step was missing here; he had expressed hostility, but I had not received the communication and really taken it in in relation to me as his object. There was a monster in the room, but where was it located? He punished himself, but perhaps the person he really wanted to punish, or rather, needed to hold responsible, was me in the transference, as representing the qualities of his early experience, embodied now in relation to the adults in his life. My omission left him with the hatred, and furthermore, with a reinforced feeling that the relationship with his object could not survive the direct force of his hostility. Yet my hesitant naming of 'the strange lady' feeling does seem to have scared him - he responded by wanting to put the blanket

over my head, before climbing into the cupboard when I prevented that. No wonder the space in the cupboard was extremely uncomfortable. It seems to me that he could not feel fully taken into a safe place, until he had experienced me taking in, without retaliation, the force of his hatred as directed towards me. There is an element of this in the session, implicitly, in that I was still available to him after his having thrown marbles at me, but I did not explicitly accept his hatred towards me until some time later in the therapy, as I will try to show, when I think he found it helpful.

It may be illuminating to give the material that followed getting out of the cupboard.

There was a sequence of play about a car, which was trying to escape because it had stolen something. It was pursued by a police car, and went to hide in a little wooden play house. That wasn't enough protection, so Dan piled on two big cushions, and two blankets. However, even this wasn't enough: the police car had the helicopter on its side and the helicopter turned out to have a saw, which cut through the cushions and blankets to get to the hiding place. It felt vicious. I said there seemed to be absolutely nowhere safe for this little car to hide, and, feeling nervous and unsure whether naming this would be helpful or not, I tried to link it to what had happened in our session, and how frightened he may have been about what I 'saw'. I suggested that he may feel what I saw would be a very bad boy who threw things, and not a boy who felt scared sometimes. Then he said he needed the loo, and I felt I'd over done it.

The difficulty of processing these fearful feelings with such a quality of imminent danger is apparent. In keeping my comments in the play, I could seem to be abrogating responsibility; in naming my role in his fears, I could exacerbate his terror and trigger a primitive response, bypassing his pre-frontal cortex, cutting out thought before action, and directly activating the fright response of his amygdala. What I did in the session material above was try to walk a narrow tightrope, which hinted at a link with the session, but identified the fear and not the monstrous badness that was felt to cause it - which I experienced in the room as the viciousness of the saw. He immediately needed to leave the room

at that point to go to the loo. Even beginning to approach the nature of it felt inflammatory, and the room seemed to become intolerable for him, so that he felt the need to leave, and to evacuate something from his body.

During this first phase of therapy, it was very hard for Dan to stay in the room with me. He repeatedly left the room to go to the loo, or get water, or just ran out down the corridor. Sometimes this extended a game of hide and seek that I will discuss shortly, but sometimes it felt more extreme; for example, he would make a dash for the fire exit, or switch all the lights off in the corridor, or push the emergency call button. There was evidently a feeling of danger for Dan in connection with being taken into the session with me.

The car that was trying to escape is worth considering here, coming as it does immediately after the stint in the cupboard. The fact that Dan portrayed the car as having stolen something seems noteworthy, as if he was in touch with a feeling of having been deprived of something. Increasingly over time, there was a sense of entitlement in session material associated with stealing, in line with Winnicott's (1946) ideas about deprivation and delinquency as a sign of hope, rightfully addressing a need. At this early stage, however, getting what you need was a covert business, associated with the terrifying prospect of being hunted down for punishment.

This seems to link with the need for a cover-up show, for example, the winning performance of the dancing waiter in the early session quoted above, to distract attention from what he seems to have experienced as a crime, a kind of robbery. Thus, being taken into therapy and receiving my attention was a complex, ambivalent, frightening experience for him, associated with lots of fears about what I might see. The symbol he used of a persecuting, relentless, cutting saw portrays this graphically. Again, as in the pooh pizza material, there is confusion about who might be felt to be the source of the problem. The saw may have represented potentially not just his object, but a part of him that would be enraged to fully see and keep in view what had been taken - perhaps felt to be robbed - from him. It may be that not seeing/being seen was his way of trying to maintain a fragile equilibrium. Being taken into therapy necessitated being seen,

and thus posed a threat to this fragile equilibrium that was felt to be very dangerous.

Material from session 39, a month later, seems to clarify the feeling of danger associated for Dan with being taken in, precipitating his urgent need to get out of the room.

Making a den: 'Safe in here'

In a session after one missed through my illness, he began by tipping over an armchair, examining it, then crawling underneath it. It wasn't quite big enough. I felt that he wanted somewhere to be tucked safely away, and felt sad for him that he was getting too big. I said something along these lines, about wanting somewhere to be safely tucked in but maybe worried that he might be too big now.

He spotted the table as an alternative and crawled underneath it, curling up. I said it looked as if he might like to be a baby safely curled up in a mum's tum, so that we would never have to be apart. He said, 'You forgot me'. I said that when I was away last session he felt as though I had dropped him, and forgotten all about him. I said I thought it was very hard for him to think that he might be safely tucked up in my mind, even though we were not in the same room; hard to think I might be wondering about whether he was OK and what he was up to, keeping him in my mind when we were not in the room together.

The curled up place then became a den, and he began to use strange language. I said perhaps he needed me to know what it feels like to be on the outside, not sure what might be going on - my words sound like a foreign language sometimes.

Looking back, this response to my remarks about keeping him in mind suggests that he felt them to be inflammatory. The space to curl up in turned into a den. Something potentially protective became defensive, even hostile, emanating strange words. This may have happened because part of him apprehended and responded to the idea of a mind to hold him, but it was too painful to

contemplate, given both the tremendous loss in the past, and the prospect of the almost immediate loss of it now, in the ending of the session.

However, it also seems likely that my words made no sense to another part of him. This part may have actively wanted to reject such a possibility as meaningless, for contemplating such a close connection as desirable would bring his inner world into turmoil, if it was organised on the principle that guarded separation is necessary for survival. My counter-transference was of exclusion, which may connect with ideas about twoness and threeness discussed in relation to the first session quoted, and have a link with the missed session. It may be that as soon as he began to apprehend the possibility of being held in mind, the interruptions were unbearable.

He asked me to cover him up and I put a blanket over the table top. He was eager for me to block out all view of him or gaps in the blanket: 'Put something here, where my hand is', he said. I pulled the blanket across and said he wanted not to have anyone seeing him. Then he asked for the box, and also asked me to make it darker, because it was still too light. I said I could not make it dark enough for him, the light still gets in. He said he felt safe in there. It felt genuine for that moment, and I said 'You feel safe in there.' He said 'Night night' and made loud snoring noises. I said it sounded like someone sleeping, but they were doing it very loudly to make sure someone thinks they're asleep. I could hear him rustling about while he made the snoring noises, and wondered what he was doing while he was pretending to be asleep. Then he threw out a lump of playdoh, and then another, and made baby noises. I said it sounded like there was a baby in there who was throwing lumps of stuff out. He threw another lump and said it was yucky stuff. I said there was yucky stuff around and the baby was throwing it out at me.

He said, 'Now I can play with my dinosaurs', and I wondered about the link between throwing out what felt like lumps of shit and the dinosaurs, beasts from ancient history. A phrase of a looked after child came into my mind about 'people from the old days', who came and wreaked havoc. He said in an angry gruff male voice that the bad baby was going to get whacked because he had

lost his nappy. I said the baby had lost his nappy, and now the man was angry with him and was going to hurt him. He told me the baby had dropped the nappy on purpose, and I said that although the baby was so little, it seemed like things were still the baby's fault. He said the man was looking for a whip to whack the bad baby's bottom with. I had a picture very vividly brought to mind of a little child with a bare bottom about to be hit. I said it was very cruel that the man was going to whack the baby's bottom with a whip, and then felt unsure whether Dan could hear this at the moment or whether he was more identified with the man.

This then was the place into which Dan took me in sessions, and into which he felt himself to be taken, linked to a feeling of having been forgotten. My missing a session through illness evoked the neglect and cruelty of his early childhood, in which he seemed to experience the neglect as being his own fault for being bad. He seemed to re-experience in this session the dangers of cruel punishment for the 'bad baby', but in a way that suggested the possibility of an identification with the cruel man figure.

I would now like to explore the link between neglect as exemplified by missed sessions and Dan's capacity to be taken into, and indeed, to take in, the possibility of a shared world with different qualities. In order to investigate this connection, I offer some material from session 47 that occurred after two sessions missed because of family illness.

Imaginary worlds: 'our town', spiderman and the incredible hulk

In the Introduction, I mentioned the imaginary worlds that Dan created and into which I was taken in sessions. It seemed to be crucial to the therapy for me to be taken into the world of Dan's mind, if he was eventually to be taken into mine on his terms. The alternative seemed to be a kind of performance, in which we were together as audience and performer, and he had the job of entertaining me. Session 47 shed light on this dynamic. It took place five months into the therapy, after two missed sessions.

He began by smiling in a rather brittle way, and saying, 'You weren't there.' I said I wasn't there when it was time for us to meet up. He agreed and then went to the desk and sat down, telling me to budge up closer. He spotted my glasses and tried them on, passing me his to hold. He said he hated his, and I registered the strength of this. I then said maybe he wondered what it's like looking through my eyes.

I felt he was showing me not just that he hated the glasses in themselves, but that he hated what people saw when they looked at him. This may well have had a link in his mind with the two missed sessions; it may have been his unconscious explanation for why I had not been able to 'see' him. The glasses seemed to stand for a view of him that was hated and hateful, that I needed to take in if I was to take in his internal world, so that he felt taken in in a more real way. He seemed by this stage to want to 'budge up closer' as he invited me to do at the beginning. The evidence of what follows suggests that trying on my glasses may have symbolized the growing appeal to him of the possibility of a new way of looking, that was shared rather than oppositional.

He nodded briefly but changed the subject, saying, what shall we make for our town? I registered that we were making somewhere together, a town that would belong to both of us, and said, 'We-ell...let's think..' He told me, 'I like it when you do that.' I asked what he liked, and he said it was when I said 'We-ell..' He told me it was like CBeebies although he liked CBBC . I said that although he was nine now and liked older things like CBBC, a younger bit of him still liked it when I said CBeebies type things. He said yes.

He wasn't sure what to make, and then suddenly grabbed a bit of paper, folded it in half and started cutting out a double rectangle, saying 'I know!' I was curious to know what it might be. As he cut, he talked to me in the made-up language he sometimes uses and seemed to want me to try it out. I repeated the word to him and he corrected me, amused. I carried on trying to get it right till he was happy with it, and said something about trying to learn his language. He smiled at me and it felt good, like a moment in which something was understood between us, and he said 'You are, you're learning, girl!'

There were moments during the therapy when 'his language' felt purposefully excluding, as if the point was to convey how meaningless my words can feel to him sometimes, as if I was in my own little world without him when I talked, and he wanted me to know what that felt like. However, this felt different. It felt as if there was a hope that we could get back together again after a gap, and I would try to understand what he meant. This seemed to usher in the idea of a shared world, represented by 'our town', in which his younger, 'CBeebies' feelings could be taken into account.

However, his ambivalence about what kind of world this was soon emerged:

He started to write a 'p' on the paper rectangle he'd cut out, and then changed his mind and turned it over, writing 'karate'. He passed it to me to read, and I did, remarking how quickly he had changed his mind – I wondered what he was going to put before, beginning with 'p..?' He said pizza. I said something like, 'Mm, that's interesting, pizza turns into karate very quickly, before the word is even written. So a place where you get fed turns into a place where there's kicking and self defence.' He said yes.

He then said what the town needed was an airport. I wondered aloud about what that need for an airport might be about. He folded a piece of paper in half and put it on the page like a tent. He told me to write on it that 'BFB' was leaving in ten minutes. He asked me to stick it down and showed me how he wanted it. I said it looked like it might be a departures board, that tells people when planes are leaving, and he agreed. I said maybe he was showing us both that it seemed like just when he got settled somewhere, it felt like he was going to have to go away soon. He asked me to add some more to the list of planes leaving any minute, and I said perhaps he was showing me that people are setting off very soon, with hardly any time left to be together. There seems to be no time to get settled, everyone has to rush off very quickly to catch their plane. I said that perhaps it was a bit like our sessions, all that coming and going. Perhaps as soon as he gets settled and we start getting on with something together, it feels like time to go. He said yes.

He said we needed to make a plane now, and I said there seemed to be something about wanting a plane – did the people want to get away sometimes? He said they did, and handed the sheet of paper to me, indicating that I should draw the plane, saying he was rubbish at it. I said he was telling me he felt he was rubbish at it, but I wondered if he thought I would think it was rubbish what he drew? He smiled and drew a spindly little plane, a bit like a rocket. He handed it to me to cut out. He smiled and rather bashfully said he wanted to throw it away. I said he felt like throwing it away, but perhaps he was hoping that I wouldn't want to throw it away, but would want to keep it. I was holding it as I spoke and he seemed touched.

He got the sellotape and began to wind it around my chair and the desk. I said 'I get it, I'm not going anywhere', and he repeated 'You're not going anywhere!' delightedly. As he worked, I said perhaps he hated the fact that sessions had to end, and I thought he wanted to keep me here; maybe this was the only way he could think of to keep me here, by sticking me with sellotape. I told him I thought it might be really hard for him to think for a minute that I would want to be here with him if he didn't stick me down.

He wound it more and more extravagantly around my chair and the desk, and then began to wind it around my wrists, which I let him, and my ankles, which I didn't let him. I said how much he wanted to make sure I couldn't go anywhere, and would have to stay right here. He smiled and said yes. He carried on sticking the sellotape to everything he could think of, the doll's house, the door, the cupboard. It was sad watching him, and the sellotape didn't stick on the door well enough to hold the tension of the next stretch. I said the sellotape wasn't strong enough, and perhaps he wished he had a stronger way than sellotape to hold onto people and stop them going.

He smiled cunningly and said it was a trap he was making, and I said maybe he felt that making me stay meant he had to trap me, because it was so hard to believe I might want to stay otherwise. He said he was spiderman and repeated that he was making a trap, and I thought perhaps I hadn't got it the first time. He laughed in a mischievous way. So I said I thought perhaps he felt cruel, as if I

might want to get away and he was stopping me. I told him I thought it would be so hard for him to think I might want to stay and be here with him, but felt I was repeating myself and not getting through.

He started chopping through the sellotape and said the incredible hulk was here now. It was towards the end of the session, and as he waded about looking big and karate chopping through the sellotape, I wondered aloud if maybe the incredible hulk made it easier to take things apart when they'd been together? He karate chopped through as much of the sellotape as he could, with an air of rescue, and I unwound my wrists. I said that it looked as though the incredible hulk was trying to rescue me from spiderman's web.

I said I thought it might be really important to look at our calendar together in a minute and see when we were meeting next, because I wondered if the incredible hulk might think that once links were chopped through, they could never come back together again. We looked at the calendar and saw that we were meeting the next day. He told me the incredible hulk would be back tomorrow.

The link between the pizza, so quickly replaced by karate, and then a plane departure, the sellotape, spiderman and the incredible hulk was fascinating. He seemed to be representing symbolically the fears and dangers of being taken into a shared world, in which he had a hope of being nourished. There seemed to be a worry that his aggression, connected perhaps to having to wait too long, meant people would leave, and thus had to be stuck into place; it may also have meant he would want to leave. His sense of his own capacity to keep people was that it was insufficient; they seemed to have to be trapped by spiderman, a figure with superpowers. This would fit with an early template for relating set by neglect and being passed around the family, before a foster placement and then adoption. Spiderman's web, though, precipitated the appearance of the incredible hulk; a figure who transforms through anger into somebody huge, green and monstrous. Yet his role in the play seemed to be intended to be helpful, releasing me from spiderman's binding web. Was he, I wonder, felt to be

containing all the anger, swelling to huge proportions, so as not to inflict it on the maternal internal figure felt to be trapped and helpless?

It was time to finish, and we walked back to mum in the waiting room. Mum said sorry about the missed session earlier in the week, she'd been ill. Dan looked at me and smiled in an anxious placatory way, as if I'd been wrongly blamed, and said, 'So that was the reason!' I nodded at him, feeling that it was OK, and he looked relieved.

This exchange of looks was one of many unspoken moments which conveyed both his and my sense of 'you know that I know' how he had needed to use me - perhaps an example of Braten's (2008) intersubjective attunement. I think my look may have conveyed to him that it was OK, I would not retaliate for the reproach that he had transferred onto me. It seems that children like Dan, whose expectations of relationships are adapted to adversity, need someone to take compassionate responsibility for the failures of their objects, in order to internalise a more robust object, and begin to relate differently. However, both content and process are important here; this unspoken exchange shows that by this stage, we had established the beginnings of an implicit non-verbal attunement - seeing through each other's eyes, as he had done symbolically in trying on my glasses at the start of this session.

Performance and the appreciative audience: 'You say wow!'

Following on from its appearance at the beginning of our work together, the graceful waiter performance recurred frequently, with its undercurrent of sewage. It seemed to be his way of letting me know how hard it was to disentangle the confusion about whose need is being satisfied. Furthermore, the hopeful desire to be a lovely baby, capable of evoking delight, seemed to cause him some pain, and competed in him with the feeling that he was the 'bad baby'; not at all the kind of baby who can be taken in and looked after, and so it was better not to hope, but to protect himself from the anguish of disappointment by

doing it all himself. The complexity of this was exemplified after just over six months' work, in session 67:

He spotted some new playdoh along with the old, and gave me a rather sing-song, 'Thank you!'. This felt like a mixture of the genuine and the formulaic, as if the child-like 'say thank you' formulation did briefly express something for him. He examined the old playdoh and told me it still had bits in it that needed to come out, while starting to play with it. I said although there were bits and it was not perfect, it looked like it could still be used. A little while later, as he played, he said to himself: 'It doesn't have to be thrown away just because it's yucky'.

Maybe the sing-song 'thank you' for the new playdoh, which seemed part heartfelt and part forced or formulaic, represented a complicated mixture of positive and negative feelings which were impossible to sort out, like the old and new playdoh he combined. I said that the playdoh was still useable, because he had started to use it, but I now feel this remark pre-empted a development that had not yet happened – a sense of something compromised but workable, that perhaps had still not yet been fully established two years later. Perhaps more to the point would have been an exploration of the feeling of something 'yucky' that had to be hidden, disguised or misrepresented, along with the concomitant feeling of being deceived. This material seems to link with the pooh-pizza material, that reminded me of a baby's filled nappy. He had already shown me how he felt he was himself the 'yucky' baby who was thrown away.

The task of sorting out, of good and bad, old and new, things that were to be kept and things that were to be thrown away, was the work of the following two and a half years of therapy. In his final session, he did sort through his box and folders and decide what he wanted to keep, what to throw away, what I was to keep, and what 'the children' could have. In this first stage of the therapy, things were much more entangled and confused, but after six months it was evident at times that he was engaged in the process of trying to sort out the confusion. In session 54, quoted from above,

He then said he was being a chef, and told me I could not see him in the game, but could in real life - the first time he has made that distinction. He made a cake for me, very carefully and beautifully, out of old and new playdoh; the old was the filling and decoration.

He had earlier used the word 'yucky', about the old playdoh filling and decoration for the cake, and although the associations were faecal, the word was used in the context of something to eat.

The correlation between psychic and physical taking in has been studied from the earliest days of psychoanalysis. There is not space here to do justice to this huge area, touching on symbol formation and on serious physical symptoms like eating disorders. However, Abraham's (1916) patient who when he was a little boy 'had the idea that loving somebody was exactly the same as the idea of eating something good' (1916:257) reminds me of Dan, who had the opposite experience. Dan often talked about having been given poisoned milk as a baby; his experience of loving connection to others was laced with danger. He may well, in the cake material quoted above, have felt that he was being asked by me to swallow something dangerous and disgusting in this session and pretend it was good now. It would have been helpful if I had been able to talk to him about this, rather than just feel it, but still after six months' work, it was as if, for Dan and for me too, a kind of embargo applied, and it was not talkable yet. Maybe this relates to the feeling of confusion that was around, which may have been a mask for a question about who might be the source of something disgusting.

Schimmenti's writing about shame is relevant here. He sees an understanding of shame as 'critical for evaluating the psychic functioning of patients who have experienced parental neglect or abuse', and illustrates 'how emotional neglect and intense role reversal can lead to negative expectations of interpersonal relationships, disturbing feelings of shame, and a sense of a defective self' (2012:195).

It would thus have been helpful to claim the shittiness more in relation to me and the weekly therapy-cake with its sessions and gaps, rather than leaving Dan with the fear and shame of suspecting himself to be the unlovably shitty baby. It made for a complicated constellation. I think he felt he needed a smokescreen for his fierce desire for revenge: a stance of 'I am doing something lovely for you (but really it's disgusting)' which might perhaps compound his sense of unlovableness, even if it stoked a feeling of secret triumph, of having 'got one over' on me. The nature of what is taken in is suspect, and heavily disguised. This seems to be the way it is experienced by Dan whether he is on the giving or receiving end of this transaction - he was showing me a world in which something bad was presented as good, which necessitated disguise and deception. In fact, he later talked about the 'bad milk' that he was fed as a child. Thus, at a primitive oral level, with its psychic parallel, Dan's experience had taught him it was not safe to swallow what he was given.

This was conveyed in the same session when he made the cake, carefully and elaborately, out of old and new playdoh. It had a complicated feeling about it, as if something was being masked - reminiscent of the pooh-pizza session in the first week. I felt he was showing me he wanted to make something nice for me, but somehow slip in the 'old stuff' playdoh, which had a distinctly faecal feel. Our last session had been difficult and chaotic, and it did seem that he was making some kind of reparative effort, although complicated and compromised by the insertion of the 'old stuff'.

In the reversal of the feeding role, and its partial corruption with faecal material, I think Dan was showing me complex interacting layers of disturbing feelings of shame, fear of abandonment for being defective, protection against this by taking the feeding role, and furthermore, a fierce but furtive desire for revenge in relation to this question. That there was something furtive was evident when he insisted the cake had to be cooked outside the room in the corridor:

I wondered aloud about this cooking place; why did it need to be outside? He did not answer this directly, but hurried towards the door. I said that it looked like he felt something needed to be got out of the room, but I thought we needed to

try and stay in the room together and see if we could manage to do the cake stuff in here. He accepted this, putting the cake near the door instead and telling me that would be the cooking place. He danced across the room, carrying the plate with flair and a bit of a flourish, and I was struck by his graceful physicality. I said he was dancing, and noticed that he carried the plates behind his back. He told me: 'You say Wow!' I was delighted by him, and did say wow, because I felt it, alongside something more complicated, perhaps to do with disguised oppression. I said he was showing me something pretty clever, and I was to be quite impressed with what he could do - all that work he was forced to do, cooking and waiting, so hard, but he was making it look easy, turning it into a dance. I was genuinely impressed by his graceful performance.

His 'You say Wow!' was poignant; I did say, and feel, 'Wow!' among other things. For me, there was something essential in him to be celebrated in that moment. It may be that I was taken in, in the deceptive sense, by a performance he may not have felt was authentic. However, he may have needed me to be 'taken in' at some level, while also at another level needing me not to be; to be aware the performance was not the whole story. I did realise there was a strong element of 'yucky stuff' secreted into the performance, but just as a new parent often does not mind their baby's dirty nappy as much as another person might, I felt well-disposed towards him, even as he was preparing the cake with its subtext.

This parallel between the parent/infant and therapist/patient relationship relates to Hurry's (1998) conception of developmentally-informed therapy, which sees interactions between therapist and child as essentially similar to those that would take place between parent and child, with the spontaneity of the therapist a crucial element. Alvarez's thinking too about the developmental function of idealization is relevant here. In her paper on 'the necessary angel', she makes a 'distinction between processes of idealization used as a defence against persecutory anxiety or depressive pain and processes of idealization which occur as necessary stages of development' (1992:118). She argues that integration of bright and dark can only happen once the ideal is felt to be potentially available, alongside the persecutory, and warns against exposing tiny

glimpses of the hope of something lovely to constant reminders of despair. This relates to the question of whether it would have been helpful to be able to name what was hidden behind his back and also in the cake more than I did. Perhaps he needed me to foreground the loveliness, well aware that it was not the whole picture, but very much worth noticing all the same.

From another viewpoint, another kind of developmental perspective, Stern (2004) writes about the shift from the experience of the present moment to putting it into words the moment after. He suggests that this more distant position only appears to objectify the experience, when 'actually it is still a first-person experience about trying to take a third-person stance relative to something that just happened' (2004:33). On this occasion, the shared experience of something joyful did seem to facilitate something being taken in, for Dan was then able to show some vulnerability more openly:

Shortly after this exchange, the cakes became difficult to carry and he struggled for a few moments. I felt an impulse to offer to help. Then he said 'I need help!' and I came and helped him, noticing aloud that he had a lot to carry and it was hard to balance. He said he had rescued them and I agreed. I said he had a lot on his plate and he accepted this.

In this interchange, he seemed to be on the verge of taking me into his private world, in which he was needy, and to allow himself to be taken into a relationship in which he could be cared for and helped. He did however, need then to represent what happened to both of us as his having rescued something, and I think this was valid. I did not pre-empt his call for help by offering first, although the impulse was there. He was thus the author of the rescue. He was perhaps facilitated in this by feeling held in a relationship that could apprehend positive and negative aspects of his personality; could take in the performance and the pooh, even though, at this stage, the second was done mostly implicitly, for fear of reinforcing his shame.

Imaginary worlds: carworld and stuntman

I have mentioned the imaginary worlds into which I was taken in working with Dan. One of these was 'carworld'. This next excerpt from session 98, which took place about a year into the therapy, shortly after his tenth birthday, exemplifies some of the qualities of carworld.

Dan began the session by talking about my town, where he came for sessions: 'a strange place', not like his town. As he spoke, he stretched out between the chair and table, forming a kind of bridge with his body which did not quite reach. I said maybe it felt like there were two different worlds, and he was stretched between them. It looked like maybe he felt in danger of falling, I said with some feeling, gesturing at his precarious stretch. He did not want me to say this and scrambled off the chair in an irritated way, shaking his head. He nearly did fall and I helped him get down, saying that although he did have someone here to help with the stretch - me, it did not seem to be much use. He hurried over to the cupboard, saying 'Teatime!'

We were back with the waiter, who was as attentive as ever, and furthermore, this time only had the use of one arm. Dan seemed to be using the waiter to try and protect himself against the danger of being another kind of waiter, waiting between sessions. At these times, I think he felt himself to be in an extremely precarious situation between two worlds, physically demonstrated in this session by the stretch of his body between chair and table as he talked about my town and his. The issue of bringing together two worlds, old and new, is hugely problematic for adopted children, especially those who have been adopted after significant time in birth and foster families, as Dan had been. Fagan writes about the conflicting sets of relationships for late adopted children, and the difficulties in bringing two worlds together. She suggests that they can struggle to know what is real and alerts us to the 'desperate jumble and collapse of the past and the present, as damaged and inadequate internal objects from the past vie with new introjections' (2011:131). Good and bad, old and new are hopelessly intermingled, like the playdoh with bits in it that cannot be removed.

In the world of the waiter that he turned to after the risk of falling, once again, there was a cowpat-cake. This time, I was a bit more able to talk with him about the feeling that I might be forced to eat it and pretend it was a lovely cake.

I also wondered with him about a link between the cake and the stretch between the two towns and danger of falling between them, suggesting that it seemed that as soon as he began to feel something good might be on offer, there was a fear of falling into the gap in its absence, when he felt no-one was there to catch him. I tried to put into words the possibility that his remedy was to try to bridge the gap with himself, and turn the waiting child into the kind of waiter who served food, but this was tainted food. It occurred to me that the cake might be heavily overlaid with feelings about his birthday the previous weekend. I said that he had just had a birthday, and here we were with a cake - what might the cake be showing us about what his birthday felt like?

I think these wonderings of mine, even if they did describe his experience, or possibly because they did, were too much for him - an overdose. It may be that I was so keen to show that I had taken in what he was showing me, I was not identifying sufficiently with the pain of it. In response to what I had said, he became rather manic.

He parked a motorbike in the cake, and tried hard to fix a stuntman on the bike. My heart sank; it felt mindless. I thought of a world of motorbikes and stuntmen he has shown me before, that we have come to call carworld, where danger is faced carelessly and no-one registers hurt. I said it looked hard to get him on the bike, and suggested that maybe things were not working too well for the stuntman just now. He set him precariously on top of a line of felt pens representing candles. I said it looked like he was a kind of offering up there on the cake candles - even a sacrifice. He might burn but he just had to lie there - I wondered why. He put more felt pens in a circle, saying that he would be safer. I did not feel he was safe. I felt he was showing me a world in which stoic suffering is glorified. An image of a motorcyclist on a stunt called the wall of death came to mind. It struck me that maybe it was not about safety at all, it was

about daring and self sacrifice and what danger he could bear alone. As he brought the cake over to show me, I said something like, 'I think maybe you're bringing me the stuntman and hoping I'll think he's pretty great, high up there on the candles'. He brought the cake over to present before me with a flourish. I said that was quite a performance – he was not noticing the danger; I was not to notice the danger - I was to be impressed, but meanwhile, stuntman would get burned.

Looking back on this session is painful. It was the first one after a birthday, and it seems to me now that I had perhaps confirmed his worst fears about being neglected by not giving him a present, or indeed, being present. Again, looking back, it would have been helpful to find a way to acknowledge the pain I had inflicted by seeming not to care about him in not giving him a present/presence on his birthday. Unfortunately, I was not able to come anywhere near voicing or even feeling this in the session. In fact, at the time, I had the feeling that I was not important enough to him for it to matter whether or not I had given him a present. The idea that I might matter to him, either as myself or as a representation of key adults in his life, would have felt to me like an aggrandisement. I think this feeling was an important communication about our relationship, letting me know that experience had taught Dan that letting people matter was a dangerous enterprise, to be avoided at all costs. The world of the stuntman figure seemed to offer him a kind of psychic retreat (Steiner, 1993) that protected him from feeling the extreme suffering of starvation and neglect, represented by the burning candles, though it prevented him developing a more genuinely resilient relationship with reality. Stuntman seemed to kick into gear and manically triumph, surviving torture, soon after a neglected birthday and a feeling of falling with no-one to help.

Perhaps retreating to a stuntman performance of extreme and unacknowledged danger was Dan's way of coping with an internal world in which there was no order - anything could happen. Dan's sense of himself as a daredevil survivor against the odds seemed to be an organising principle, without which he feared imminent and utter collapse. My promptings about safety and protection seemed wide of the mark. I think he wanted me to see him as strong, and to recognise

the strength and toughness that he did in fact have, and felt he had to have, as well as the fantasy toughness that protected him from psychic pain but prevented his development and relating in fuller ways.

For Dan, I think there was a desperate struggle to prevent his hatred and resentment about this state of affairs breaking out and destroying everything. Perhaps he felt it could only be leaked out in heavy disguise - the cowpat cake - in order to preserve the hope of something more loving, against overwhelming odds. He did not seem to have much faith that I would withstand the full force of his fury. In the transference I think I was experienced as rather fragile and easily broken. His adoptive mother did in fact need hospital treatment about a year into Dan's life with his new family. The stuntman who was prepared to face danger and death and gloried in the sacrifice may have been his way of coping with this situation and protecting his objects – me as the neglectful mother in the transference, forgetting his birthday - from the vengeance he may have wished to inflict. In carworld, no-one was ever really damaged and no-one could be hurt, although there were terrible crashes and collisions in mid-air. People fell in slow motion, and gang members would come to their rescue. I think this seemed to him to be a more reliable protection than my intermittent efforts. Like the one armed waiter, he would rather manage without.

However, interestingly, noticing that the stuntman's performance might mean he got burnt was followed by a performance of his own:

He told me he was going to do a performance, and began to do a dance routine, pretty agile and a bit flash, singing a Michael Jackson song and changing the words to say 'blame it on the boobies' which struck me as pretty direct. I felt like a tantalising booby mother, who seemed to offer good things that were really bad. I remembered the 'bad milk' that he has told me he was fed as a child. He seemed excited and rather manic. I suggested that he was telling me the boobies have a lot to answer for. He smiled and carried on singing, but when the session had to end, he grabbed wildly at whatever he could, throwing things about and tipping things out. I talked about how he felt like I was cruelly chucking him out and getting rid of him, even after his performance. This

seemed to calm him down a bit, and he nodded. Instead of trashing the rest of the room as he has often done in the past, he was able to stop and check about when we were next meeting.

This performance pointed at a source of the trouble other than himself: 'blame it on the boobies'. Dan had previously talked about Michael Jackson as someone who had suffered in early life and then done what he called stupid things. In identification with him, Dan could blame it on the boobies, which felt like quite a direct accusation, and a reasonable thing to do in the circumstances. His performance was excited, but had lost the quality of torture and sacrifice that characterised the stuntman on the candles. I am not sure what effected this change; it may have been that he felt I did, occasionally, 'get it'; it may have been that my talking about a performance which ignored the stuntman's suffering meant he was less caught up inside it. No wonder he felt angry that the session had to end so soon after this song - perhaps he felt I was getting rid of him for daring to blame it on the boobies, even though it was dressed up in an engaging performance. He seemed in his reaction to the ending to be conveying his anger about how impossible he felt it to be for him to be really taken in emotionally in a lasting way, despite his best efforts to impress and delight. He did seem calmed, though, by my acknowledgement of this. Klein's (1940) work on the relationship between mourning and manic depressive states of mind suggests that beginning to acknowledge the failures of the object, in a relationship he felt could withstand this, may have lessened the intensity of his manic defence.

To put it another way, towards the end of the first year of therapy, the new world of our relationship was beginning to become possible, through my mostly implicit acceptance of the world he was showing me in sessions, the world of his early childhood. Occasionally, when he was able to feel that I could 'take it' without retaliation or collapse - like when I said that it felt like I was cruelly chucking him out after his 'blame it on the boobies' performance, he stopped trashing the room and noticed where we were, checking when we were next meeting.

Rescue, or the absence of it: 'Where were you?'

However, despite these advances, Dan tested my limits and the limits of the room ferociously and often. He would frequently run out of the room or press the alarm bell. This may have been a sign that there was huge conflict about where the monstrous badness I have mentioned earlier was felt to reside; often, badness was not felt to be outside, but to be inside the room. We have seen that his response seemed to be the human sacrifice position of stuntman, which necessitated tremendous physical courage in an internal world in which a powerful destructive force seemed to be prevalent, in the absence of supportive good figures. However, at this stage, as the previous session showed, there seemed to be the beginnings of a consolidation of a shift from the stuntman state of mind with its disguised attacks, towards a feeling that the relationship may be able to survive blaming the object more directly. There began to be an amplification of the range of ways of relating that he felt were possible now, beyond the performer/audience relationship.

Session 123, about a year into the work, seemed to demonstrate this. It took place after a Christmas break, which was extended because of heavy snow. After telling me he was growing and building up his muscles, and doing some 'tough guy' training, he decided that he wanted to play football. There was a problem: we could not find his ball.

He looked angry about this and went over to the cupboard. He made a kind of monster face, and a growling noise. I said I could see he was angry and felt I had really let him down, forgetting his ball. He did angry breathing, with a manic smile, and began to tip things out of their boxes, and hurl them onto the floor. It felt more purposeful than rage, more like vengeance. I said he was furious with me, but he was pleased as well - it would teach me a lesson and give him a chance to show me what it feels like; I can see what it's like when my stuff is dropped. I listed my recent failings and all the times through the break and the snow when I had not managed to see him. As I spoke, he knelt on the floor and threw things one by one, first across the room and then more directly at me. I

said I thought he wanted me to know he hated me sometimes – it was my fault he had to be so strong, leaving him to cope all over Christmas.

He climbed up onto the top of the cupboard and I said no wonder he wanted to be right at the top - king of the castle, because there was no way he was going to be down there on the floor with all the dropped stuff. I said he felt I didn't care, why should he care? I voiced it from what I felt might be his point of view: 'If she cared, she wouldn't have forgotten my ball, she wouldn't have missed any sessions all through Christmas and the snow - she would have got to me somehow'.

Sitting tucked up on top of the cupboard, looking isolated and small, he said, 'Yeah, if she cared she would know what I been through.' I said I didn't know what he had been through, because I wasn't there. Where was I when he needed me? He said, 'Yeah, where were you? You could have helped'. I said, 'But I didn't. No-one came to rescue you. You just had to manage all on your own and you were so tiny'. In a small, ordinary voice, he talked about how first the court and then mum and dad rescued him. He said it was complicated and I didn't know what had happened. I said it was complicated, and I hadn't been there to help him put it all together. He felt I should have been there, and now all I could do was try to understand.

He began to climb down from the cupboard, and asked me to move the table nearer for him to climb onto. I said he would rather rely on the table to help than me, but not unsympathetically, and he agreed. He talked in a very poignant way about his early life. I felt like crying, and said that it was terribly sad. He talked about having flashbacks at night of when he was a baby, and told me he took it out on his mum when it was not her fault. I said he worried about that, and had been taking it out on me, too, today and it was understandable that he lashed out when I had let him down.

After telling me it was too hot in here and trying to turn the radiator down, he said he wanted to go now. I thought he meant leave the room, but it turned out that he meant into an old hiding place of his in the cupboard. He climbed in as

he had not for a long time, wanting the doors to be shut. I could feel tremendous sadness and said that he was on his own in there and he was used to being on his own, and maybe sometimes it felt calmer, but I thought it was important to know that I was outside the door today, thinking about him and waiting for him.

Alongside Dan's fierce longing for togetherness seemed to be a super sensitivity to emotional stimuli. I had tried to put words to some of his painful experiences, and although he did seem to be able to use it by this stage in our work together, he told me he found it 'too hot' and wanted to hide away. To put it another way, I think he struggled with emotional regulation. Schore describes how children who have experienced early adversity without much help struggle in 'maintaining interpersonal relationships, coping with stressful stimuli, and regulating emotion' (Schore, 2001:208). Dan was such a child, and I think he may have partly experienced therapy as an ongoing emotional trigger that he needed to protect himself against. He seemed to be using the hiding place as a way of regulating his feelings. He had felt let down, and he had hated me, and after I acknowledged that, we were able to have a moment of contemplating his painful start in life together. It was a powerful session, with 'hot' material, and he seemed to need to 'cool down' by hiding himself away. I was aware of a mental link between us this time, though, which I wanted to highlight in my comment about waiting outside for him and thinking of him. My intention here was to foster the green shoots of a development towards a different internal object relationship that seemed to be under way. He seemed to be able to be in touch with some sadness, to relinquish the protection of the performance for a little while, in the safety of a relationship that could hold him.

In telling me how his early life was complicated and I did not know what had happened, I think he was beginning to be aware of the psychic taking in, the holding in mind that he had not had. Alvarez's thinking about justice and rectification is significant here. She writes:

The sense of how things should be is connected, I think, to a deep sense of order, justice, and rightness. When the abused or deprived child indicates a longing for us to adopt him or rescue him, an interpretation along the lines of "You wish but we both know that you

can't" may increase despair and weaken the ego. "You feel I should rescue you or you feel somebody should rescue you or you feel your mother should not have abandoned you" may actually strengthen the child so long as it is not done as though containing a promise of actual rescue. (1997:767)

Hindle and Shulman (2008) write about how the absence of this feeling of someone available, a parental holding in mind, can be experienced as a shapeless, meaningless void. This may link with what Dan described as 'flashbacks' about his infancy, and the feeling I had in working with him that there was a chasm into which he feared he might fall - for example, the drop between the chair and the table that he had previously precariously stretched across with his body.

The task of finding some relationship between the different parts of Dan's experience was huge, and the necessary holding together work in sessions, even three times weekly, often felt inadequate and intermittent. The sense of separate worlds and fragmented experience was ongoing. Dan struggled to relinquish for any length of time manic ways of protecting himself from falling apart that were represented by carworld, and the stuntman. I think he may have experienced sessions as separate worlds sometimes, with no link between them. At other times, he showed me that he was furious with me for not being able to maintain the link, forgetting to make sure his ball was there, having to finish a session when he needed it to continue, or not preserving the room just as he had left it the session before. However, in the session above, we did seem to have managed to make a connection between us that could tolerate some fierce resentment. This may have helped facilitate a feeling of being taken in that could encompass strong negative feelings without retaliation, as well as positive aspects of him.

Making a den: the yoyo and the volcano

I would like to turn now to a strand of material integral to the notion of being taken in, involving the making of dens. These had many and various qualities, but all seemed to represent a retreat from the pressures of the encounter in the

room, a place from which he could interact on his own terms. He wanted to be able to see out, but for me not to be able to see in.

Earlier in the therapy, after about five months in session 59, he had shown me from inside a den how a containing pot, for him, turns into a volcano. From inside a den under a 'tent' blanket on top of the table:

He began to talk baby language in an engaging, breathy voice, and the sound turned into 'Yoyo!' I said yoyo back. He sat up and said he needed the loo - could he go? I said yes, sure, wondering if it had all got too much, and followed him to stand outside while he went. He carried on talking in yoyo language in the loo, as if calling to me, and I answered. I had the feeling that he needed to know I was there, and if he didn't hear my voice, he might have thought I had gone. A thought about toing and froing came into my mind in connection with the word yoyo, and I thought of the comings and goings of our sessions.

Back in the room, I asked did he think I might have gone if he didn't hear me? He climbed under the blanket and carried on in yoyo talk, and I said gently that I thought he needed to know I was there, and that maybe, when he couldn't hear someone, he thought they'd gone away. Still in the game, he said night night, and I said it back. Then in a more ordinary voice, still from under the blanket, he said he was making me a pot. It felt hopeful, and I said 'Oh, a pot' in a hopeful, interested voice, 'something to put things in' - then he said 'No, a volcano!' I said the pot turns into a volcano! struck by the symbolism of this. He got up and bundled it into a ball and threw it in the air as if it was burning him - I said 'Ouch! That's burning hot!' He threw it to me and said 'Blow!' which I did. I said the minute there seemed to be somewhere to put things, there was some stuff that felt like a volcano pouring out burning hot, that he needed to get cooled down, and he wanted me to cool it. He held out his hands to have it back, and I said I'd try to throw it slowly so it could cool down. It was still very hot, though, and went to and fro a few times more, getting cooler.

I felt I had a balancing act to do here, where too much linking to feelings may have been inflammatory, and yet he was showing me powerful connections to

potentially make more explicit between being cared for and explosive volcanic emotion. The emotion may have been rage, which would fit with the symbolism of the incredible hulk material turning up after spiderman had joined people together in session 47. He may also have been communicating a feeling that there was too much hot stuff for any container-person to bear, and they would erupt, just he often did. Rather than discuss this explicitly, which might have run the risk of escalating his emotion, it seemed necessary to keep it at an implicit, body level and do the toing and froing with the pot representing the hot stuff physically, cooling down between us.

Before the session ended, I made sure we looked at the calendar as we often did, to see the next time we would meet, and notice the regular rhythm of our comings and goings. However, back in the waiting room, his mother told me she wouldn't be able to bring him next time, because of a family medical appointment:

I felt the powerlessness of this, after our careful countings about when we'd next meet - he wasn't in control of the 'yo-yo', and neither was I.

The problem of containment for his explosive volcanic feelings seemed to have been played out in this early material. He conveyed a powerful sense of the improbability of his object having the capacity to take in and contain these forceful feelings. However, once the 'Where were you?' reproach about not having been rescued was taken in by me, and became more explicit between us, the quality of the 'den' material in sessions changed somewhat in nature. I will explore the nature of these changes in the following material, taken from session 134, in the second year of work a month after the 'Where were you?' session, and immediately after a session involving a den which he had enjoyed making collaboratively.

Rebuilding the den

On collecting him from the waiting room, he came eagerly towards me and hurried down the corridor ahead of me. In the room, he smiled at me

conspiratorially and began to move the chair without speaking. He seemed to be busy beginning to re-construct the den we'd made yesterday. He silently set about gathering the things he needed. He pulled a little table across the room to the cupboard and stood on it, reaching up to throw down the blankets and Ted to me from the top of the cupboard. It was a bit of a challenge to catch them - he threw them away from me as if to make it harder, as he's done when we play catch. I felt he was giving me a test I had to pass, especially in throwing the teddy bear, which I felt I really shouldn't drop. It was a bit of a no-win situation, because he seemed disappointed when I didn't drop them, as if I'd won, and it made him the loser.

Gesturing with his hand up high and the odd word, he showed me we would need the den to be higher. I said perhaps we needed more room for him today. He used the blankets as a kind of tent as we had done yesterday, and struggled to stick them to the wall and door high enough. Yesterday it was more collaborative, and we had used string to tie things securely, but today he was just using sellotape, and trying to do it more on his own. He expressed frustration, again with more hand gestures and facial expressions than words, and asked me to help in a rather exasperated way. I did, but the little bit of sellotape he had cut off to use was straining to hold the weight of the blanket. He listened alertly for the sound of the sellotape unsticking, drew in his breath and said 'Listen!' I said he had to be on the alert for the sellotape unsticking, and alluded to how hard it was to get it to stick today.

He was very keen that paper should cover any gaps between the blankets and furniture that made up the den. He bossed me around quite a bit, and seemed irritated. I said I thought perhaps he felt cross. The whole process felt much more laborious and frustrating than it did yesterday, and I said that it seemed more of a struggle today; it was the second time we were doing this and it felt a bit different this time. He said accusingly, 'Because you took it apart!' We had talked about the need for me to do this the day before, but I did not mention that now. I said I thought he was very cross with me about that - he had left it where it was and I had got rid of it after he had gone, and now he had to start again

from scratch and it was my fault. He said he wished I had left it, and I was touched and said it was very disappointing for him.

He carried on working on it for a while, but it felt frantic; he climbed around the place, over and under things, in an agile and agitated way to get what he needed. He got the wire draining rack from the tea set in the cupboard, but said it was no good, and left it by the desk. He said 'Master', and then quickly, 'No, helper' and asked me to get him something. I paused before I did what he asked, and said that it seemed like there were two things we could be today - master or helper. Some one was in charge and someone did what they said. He said yes. I said I thought he really did not want to be the helper but he did want to be the master. He said yes, with a winning smile. He carried on working on the den while I sat quietly thinking about him, and he then said crossly that I was not on my break. I began to feel bullied and exhausted, as if there was no rest anywhere. I said perhaps he needed me to know it was exhausting being a helper, you couldn't have a break but had to keep doing what the master said, whether you were tired or not.

Dan's efforts to re-build the den seemed to be hampered by his feeling that the safe place we had made the day before had been demolished by me in his absence. I think he felt this put us on either side of a power divide. We could be master and helper, and these roles might switch around between us, but we were not felt to be joint co-operators. There was a sense of wariness about how far he felt he could trust me - he wanted to watch me from a place where I could not see him.

He climbed into the den and shortly afterwards threw a big cushion out. He pulled the dolls' house across one side of the den, and then said, 'You can see through it.' I suggested that it felt really important for him that I could not see in. He had the string with him and asked, more with gestures than words, for help tying it across the legs of the furniture as a kind of fence. He said 'Put some paper!' and showed me what he meant, paper strung along the string. I said it looks like you want me to keep out; he said, 'Do a keep out sign', which I did.

There may have been a link here with Bion's bizarre fragments, where the sense organs themselves are felt to contain minutely dissected particles of terrifying unprocessed and unprocessable sensory experience - beta elements (1962:6). Perhaps his sense of my eyes on him was experienced in this way. However, by this stage in the therapeutic relationship, we had weathered a few storms, and it may have been that he wanted to communicate his anger that he felt he could no longer rely on our relationship, now that I had taken apart his den, and wanted to exclude me. If there was an element of the something unprocessed, experienced as bizarre fragments, they were now being directed at me as his object, as his use of postage later in the session seems to show. There seemed by this stage to be a feeling of something reparative, a sense that disruptions could be survived:

I stayed sitting outside by the den and waited, thinking of him inside. He asked if I could see him, and I said no. He said he could see me, and I said maybe he liked it that way round at the moment. It felt more peaceful. He asked if I could see his fingers and he stuck them out and wiggled them about. I smiled and said yes. He asked if I would like him to make funny faces. I wondered aloud if maybe he felt he needed to make funny faces to keep my interest - it might be hard for him to think I would just sit quietly out here near him, thinking of him, and not needing to be entertained. He asked if he was allowed to use the pens? I said sure, thinking that he knew that, and wondering whether to comment on it but decided not to for now. He began drawing and said something about doing something rubbish – I said it sounded like he felt what he might make would be rubbish. Did it feel like I might think it was rubbish? He said, 'No, you won't say it's rubbish.'

Here, I was trying to suggest the idea of a different view of things, even if he did not, at that moment, identify with it. His use of the word 'say' instead of 'think' may have been a veiled accusation of duplicity - I might think it was rubbish but not say so. I decided not to get embroiled in this possibility, but instead to wait and see what developed.

Then he said 'It's no good!' I asked why? He gestured across a little gap in the den with a ruler and said 'That to that!' There was a bit of a pause for a moment as I thought about it, and he said it again. It felt peremptory – as if he was indicating that I should close the gap, and I had not jumped to it quickly enough. Staying where I was, I said there was still a gap and he did not want it. I thought of a letter box, and heard him begin drawing something. Shortly afterwards, he said 'Postage coming in!' and poked his drawing through the gap. It struck me that from his point of view, it was postage going out. I reached over to get it and it was a blue felt tip drawing of a boy with solid legs and a stick thin tummy. I thought that he did not really have an inside. He was already onto the next sheet of paper, which he said was a newspaper, and he asked how to spell my name. When he pushed it out, I saw that it took the form of an odd assortment of small squares with squiggles underneath them, the kind he's used before to indicate newspaper writing, and our two names at the side. I was a bit perplexed and held it to think about. As I did so, he said 'No postage – postage needs loo!'

He was angry about my dismantling of the den, and suspicious of my motives in seeing him, but he did seem to want to communicate these feelings, rather than hide them. He seems by this stage to have developed a sense of being in relation to someone who did want to understand and be alongside him, however temporarily. It was an example of our growing attunement that I thought of a letter box, just as he said 'postage' - although it was interesting that he said 'postage coming in' rather than going out - that is, he was seeing it from my point of view, while I was imagining his.

The postage conveyed primitive feelings - the first drawing he posted out to me showed a stick-thin boy with no stomach, no space inside. I think this applied to the room as much as to the boy. My removing of the den from the day before may have been experienced as me having got rid of him, having pushed him out of the space I had seemed to be offering for him, leaving him deprived and hungry. The remark 'postage coming in' also implies no space for him - it is a role reversal; from his point of view it was coming out. He cannot rely on my being able to take in his point of view, but instead accommodates mine, which paradoxically leaves him stick thin. He is not being nourished by a holding mind,

the psychic equivalent of the feeding relationship. He is showing me a world in which he has had to do the feeding, which he was inevitably ill-equipped to do. However, the fact that he is showing me this world seems to represent the hope of a different possibility. We are moving away from the dancing waiter, who cannot hear any mention of his wait, and who secretes faecal matter into the food. He is able to let me know more directly that he is angry, 'because you took it apart!'

His subsequent postage offering seemed ambivalent; our two names, but in the context of something like a newspaper report. In so far as we did link up together, the resulting connection seemed to be newsworthy, and my hunch was that this may have been for all the wrong reasons. Two people do not normally make the papers for a straightforward warm connection. He did not elaborate on this, though, but he did need to rush to the loo immediately afterwards. This may have been his attempt to get rid of something in a bodily way that was brought up for him by the idea of our two names in the paper.

Back in the room, we just had five more minutes. He got back into his den and carried on with the postage; this time he pushed out a drawing of what looked like a very rudimentary face with two eyes, a round one and a triangular one, a square nose and a rectangle mouth. There was no outline to the face, just the features, oddly geometric and blank. I found it hard to comment or even to form a thought in response, but managed to say something about how he seemed to be giving me something important to think about - it looked rather like a face, but with sharp, hard, firm lines instead of soft, apart from one round eye?

Again, Bion's unprocessed fragments spring to mind. Asking him about them drew a blank. It was as if he just needed to hand them to me for me to think about. It felt primitive, rudimentary - I thought perhaps there was a link with the feeling of frustration and of not wanting to be seen, as if there was something shameful about his delayed development. His heartfelt 'It's no good!' earlier in the session seems to apply on several levels: his feeling about his drawings, that they would not be sincerely valued, my failure to cover him up properly, his sense of himself and his efforts generally. Dismantling yesterday's den seemed

to have left him with the feeling that it was all no good. Yet he was by this stage of the therapy, willing and able to communicate that feeling to me - which is quite astonishing, given my blindness. I am very aware in writing this that I received the communication without much of a clue; not much processing help for him. However, he may have sensed that I was gamely trying in my own limited way.

It was time to finish and he asked in an in charge kind of way if I would be alright tidying up? As we left, he smiled brightly, and then said 'Bye' to the room and den before we re-joined mum in the waiting room.

In the way he left the room, he seemed to be showing me that he was no longer expecting me to preserve the den - keep a space for him. He seemed to have defended himself against both the pain of rejection, and also the potential destructiveness of anger at my betrayal as I think he may have experienced it, by resorting to the protection of the role of master/overseer, and assigning me a servile role: 'Will you be alright tidying up?' Clearing the den away had become something he was asking me to do, and it felt like revenge, as if he was asking me: 'Oh, you don't care enough to keep the den? This is work to you. I won't care about it, either.' The fact that he did sometimes feel found by me thus seemed to exacerbate his feeling of trickery on my part, of his having been taken in by something he hoped might be real and lasting, and then turned out to be only fifty minutes of my working day.

There is a conundrum in taking a child into psychotherapy, in that the relationship is necessarily close, and feelings about parenting are transferred onto the person of the therapist, but it is a job of work, rather than a personal connection, although that may inevitably grow. Questions about the 'real relationship' seem pertinent; after all, I was really in the room, and so was Dan. The qualities of my response to him were particular to me, although there would, I hope, have been overlap between these and the responses of another therapist. Supervision had a vital role here, in offering another level of processing of implicit feeling and another world view to contribute to the developing picture. The therapy thus happens in relation to the supervision,

rather than entirely in its own little world, so that in parallel with therapy, new connections can be made and new possibilities become available.

I will now introduce the theme of hide and seek, mentioned in the Introduction as an important strand of the clinical material relevant to the theme of being taken in. There is a connection with the question of the real relationship. Dan seemed in this game to be conveying many things, one of which was a wish to be found by me, in the way a mother finds her baby. He would speak poignantly about wanting me to find him by feeling not seeing. Tellingly, though, this eventually turned into a game in which I was made to look ridiculous, to his huge amusement. He was showing me an internal world in which somebody needy is inevitably made to look a fool and mocked, and that was certainly not going to be him. However, by this time we had eighteen months' work under our belts. Taken together, the three excerpts which follow seem to me to represent a shift from the unprocessed, fragmentary, rather bizarre and confusing feeling that we have seen running implicitly underneath the 'You say wow!' element during the first year, and beginning to surface in the geometric face elements posted out from the den. It seemed that some of that feeling had now begun to arise in a way that could be attended to in our relationship.

Hide and seek: after a half term break

The following material is from session 172, which occurred after a half term break, when we had worked together nearly a year and a half.

He got up readily when I went to collect him, and after stumbling against a table in the corridor, went down the corridor beside me like someone on a mission. In the room, he plonked himself down in the easy chair and sighed and visibly relaxed. 'Made it!' he said. I said 'You finally got here, looks like it was quite an effort' . He said yeah, and swung his legs, kicking each one out in turn and saying 'Oooh!' quietly, as if it hurt. I asked if they were hurting, and coming over to sit on the desk beside me, he said he had PE yesterday, then street dance, then more dancing till half past eight. I said it sounded like his muscles had been really stretched with all that activity, and that we thought about his mind and

feelings too here, and that maybe it's been quite a stretch waiting to come here again, to hold on all that time, all through half term. He said yeah, it was.

He then painted a scene involving a house and some fog, and some wild animals behind a fence, all of which seemed heavy with symbolism connected to the difficulty of finding his object again and the need to fend off wild feelings about absence. Then,

He stood by the door and noticed the lock, saying he'd never seen that before. He turned it, and I said that was the two of us locked in now. He said he wasn't going anywhere, and I said it looked like I wasn't either - he said no-one can get in. It felt as if he might be saying we are protected from danger in here. I said no-one could get in but I couldn't go out anywhere either, I would just have to stay here, just him and me. Maybe that was the only way he could be sure of me, to be in the same room - hard to imagine I could keep him in mind even when we weren't in the same room. He smiled and unlocked it, then jumped onto the desk swivel chair and stretched his arms out, saying he needed me to pull him along.

His comment about his not going anywhere seemed to echo what I had said during the earlier spiderman material, when he had sellotaped me to the chair, that it looked like I was not going anywhere. He had loved this remark. I felt that locking the door here, albeit temporarily, was his way of making a claim on me as his object. It felt developmental - he was prepared to acknowledge that there was a relationship he wanted to hang onto, in spite of its temporary nature, and the coming and going of sessions with painful breaks, when I was not there to 'pull him along'.

I pulled him along on the chair for the length of the room, then I said I was going to sit down and think about him. He said he was left to manage on his own now, and started what sounded like a film commentary, about a tropical storm, huge waves and a survivor. He managed to pull himself on top of the cupboard, and I said the survivor was high up now, out of the waves, safer but all alone. He grabbed Ted and cuddled him tight, saying he was a little boy he'd rescued. He

tipped forward and almost fell - he had to jump quickly down, but landed on his feet. I think it gave him a shock and I said so, and also that I needed to be nearer when he was up high like that. I stood by as he climbed up again and tipped towards the edge, ready for me to catch him. I said he had nearly fallen and it was a horrid shock, and this time he wanted me to catch him - there was nothing worse than falling with no-one to catch you - maybe half term had felt like I'd dropped him. He did actually tip off the edge of the cupboard, cuddling Ted, and I carried him to the chair.

Then he initiated a game of hide and seek.

In a baby-like voice, he said 'Has and deek', which he then repeated as hide and seek. I said he really wanted me to find him, especially after the long half term break where he felt I hadn't found him, had let him drop, and he was alone and frightened, like the survivor in the big tropical storm. He asked me to count a long time for him to hide, and I counted slowly to twenty. He hid behind the chair at first, where I could easily find him. I said the survivor really wanted to be found after all he'd been through. He wanted to play again, and hid twice on top of the cupboard under a blanket. After the third time it was time to finish, and I said I would find him again on Thursday, and it might be hard for him to think that I would keep him in mind till then, but it was time to finish and go back to mum for now.

This session material was in some ways surprising, coming as it did after a break. He showed a vulnerability that was often hidden in sessions, and a capacity to symbolize that put him at one remove from the experience of being dropped; he was able to play it out imaginatively, rather than physically attack me as retribution for my absence, or run out of the room. He included an identification with a helpful figure who could notice and respond to need in his rescue of Ted.

However, the following session, 173, felt very different, and I include it to illustrate how fleeting was the presence of such a figure in his internal world.

The helping figure soon becomes suspicious, even monstrous, and it was strikingly hard to include this figure in our verbal communications.

Hide and seek: turning into a monster

He was eager to start this session, wanting to play hide and seek immediately. He did not want me to delay by talking at all - it felt like there was not a moment to lose.

I said it felt urgent, he didn't want to wait for me to do any thinking or talking. He told me to count, and crawled behind my chair and tried to get right underneath it. It felt very young and primitive, as if he wanted to hatch out from under me. He kept very still and seemed to want me to look for him all round the room before finding him, seeming to be held by the search. I found him, and he was delighted, and immediately wanted to play it again, telling me not to look while I counted to twenty.

This time he tried to hide out of sight, unlike last session, so that even when I was looking I wouldn't be able to find him. When I found him, he looked a bit hunted and uncomfortable, and said he had been trying to get his feet out of sight. I commented on the 'out of sight' - it sounded like the mood had changed; it wasn't such a nice feeling now, being found. I talked about how he'd had to hold an uncomfortable position that was hard to stay in for quite a while, and wondered how it felt when I was looking for him? He did not want to talk about this or anything else, just wanted to get on with another game of hide and seek as quickly as possible, but told me to count slowly. As he looked for somewhere to hide, he showed me how he'd leapt from behind the blind off the desk while I was counting, to get to the other side of the room. The implication was, how stupid I had been not to realise he was leaping around. He told me to count again - even more slowly this time. We played this a few more times, and I felt desperation in his voice and manner as he looked for somewhere to hide. I

asked what it felt like while I was counting. He made a panicky face to show me, and I said there seemed to be something frightening now, something panicky about when I was coming to get him. I thought perhaps he felt I'd turned into a monster coming to look for him. He didn't want me to talk about it and I said I thought maybe he felt even talking about it might be too hard at the moment.

He got his paints and brush and took them over to the desk. He twirled the brush in the black and I waited to see what he was showing me. He brought it over and stirred it into a jug of water by my side, and then did the same with each of the other colours, carrying it across each time from the desk, making a cloudy mixture. It took quite a while, and I waited and watched while he did this, and then he said those were his feelings. I said how cloudy they were, all mixed up and confused and hard to see through. We talked about all the colours that had gone in, first the black and then grey and then all the other, brighter ones. I noticed that he'd started with the dark ones, and they had coloured all the other colour feelings that had gone in there, and now they were all muddled together. Perhaps he was telling me he felt confused, with all those feelings in a murky cloud.

He got his little football out of his box, and began to paint colours on it. First black, because he said a real football was muddy, and I said yes, if you use a real football it does get muddy, and perhaps there's a real muddy, messy part of you that you're showing me, too. He got yellow on his brush and painted a section yellow, and I asked about yellow, what it reminded him of. He smiled and said it was like wee. I said there was wee on this feelings ball, as well as the mucky mud. He then painted some red on it, saying Liverpool! I said Liverpool – he said yeah they're great – and I talked about how they were a great football team, kind of champions. I said I thought he wanted some winning feelings on there; when he thought of mud and wee kind of feelings I thought it made him want to think about champion feelings, to get away from all that mess maybe. He painted blue on there too, and said it was like the sky. I talked about it as something beautiful in the mix, too, and said how I thought that painting the ball was showing us something very important about him – the dark difficult feelings he has, like when he feels frightened and needs to keep out of sight, the wee

feelings, and the wanting to be a winner feelings, and the beautiful blue feelings - all those different feelings, all part of him, and how they all seemed to get mixed up together sometimes.

Although the words here do seem to relate to what he was showing me on one level, interestingly, the ending of this session left me with some difficult feelings. Rather like the earlier 'waiter' session I have included in which I felt that what I said was aimed at an older part of him, here again, there was something much more primitive under the surface. I felt after he left that everything had gone wrong; that I had not managed to make it all right as he needed me to, and so he felt the need to attack. I felt that he wanted me to prevent attacks so that he did not have to, and that I had failed in this. It occurred to me that there might be a link with the fenced off wild animals in the painting he did before playing hide and seek last session.

Even though we touched on the feeling that I seemed to represent something monstrous to him during the second hide and seek phase, perhaps this feeling was felt to be too dangerous to really explore, and so it was left with me as an emotional communication. He moved on to show me how confusing it all was by mixing up the colours in the water jug, and maybe by this stage in the therapy, a little way into our second year, he had internalised an expectation that feelings could be represented and thought about, not just acted out. This is particularly striking, given the extreme nature of his fears to do with absence, which seemed to be a matter of life and death. Perhaps this is why the emotional impact of it stayed with me at the end of the session - maybe fears about absence, and about the damage his consequent anger could do was the real communication. Indeed, his early neglect was extreme, and could have meant starvation. Maybe the water jug was just to muddy the waters, letting me think I had made a useful contribution about the colours, when in fact he was clouding the issue of his anger. As he might experience it: how could I go, when I knew he would starve? The hide and seek material seems to suggest an implicit feeling of wanting to be found, then fears about this monstrous person, who had cruelly gone in spite of his need of her, finding him again. We managed to make some of this explicit between us, in his showing me the panic he felt on my looking for him; but this

was soon succeeded by the water jug material, which felt as though it did not address but in fact concealed deeper feelings.

The third phase of the hide and seek game demonstrated this all too clearly. I offer some material from session 179, which took place two weeks after the previous two excerpts, to further investigate this process. On re-reading it, along with the previous two hide and seek sessions, it seems to me to represent the development of a capacity to reflect together on the qualities of what was happening in the room, rather than just act it out implicitly. Between this next session and the one before, there had been another two missed sessions, because of illness in the family.

Hide and seek: dead man walking

He seemed anxious when I collected him, and after some worries about whether I was all right, he picked up his football and turned it around in his hands, looking it over, and I watched for a while. 'Maybe you're wondering if it's alright, too', I suggested, 'the Dan-ball with all your feelings. It's been a while since we met - we've missed two sessions'. Having kicked it against the door, he said, 'Come on - let's play hide and seek!' I said, 'Hide and seek again, wonder what that's about?' He said he was going to do a weird place. A weird place, I registered. Come on! he said. I said OK, and started counting. Count slowly! he told me imperiously, which I did.

He hid tucked in behind my chair, crouching in the bin. When I found him right behind me, I talked about how it looked like he wanted closeness at the moment, but there was something difficult about it - he was in the bin – perhaps he felt rubbish, or thrown away? No, he said, climbing out, it was just a hiding place - he did say it was going to be a weird place. I told him it made me think of the cool guy/weird guy picture he'd done a while ago - maybe he sometimes felt there was something weird about him that deserved to be in the bin. He told me he was going to do another weird place this time - I was to count very slowly again. This time he was under some big floor cushions, with his back showing. I said it seemed like a comfier place than the bin, and part of him was showing.

Maybe this was somewhere the part of him that felt weird could find a place and be seen. He asked to hide again and this time he lay along the radiator shelf, partly under the edge of the desk, but most of him easy to see, with his arm hanging down and his eyes shut. I thought he looked like a dead person, and also that it must hurt - it was a squash to get under the desk. He struggled out with a smile when I found him, saying it didn't hurt. I said that there was a big smile, but underneath there seemed to be something quite difficult going on. I thought he might be feeling pretty weird and rubbish today - perhaps there was a link with the two missed sessions? No, he said, it was not my fault; that was because mum was ill. I said mum's ill; maybe there's a worry that you may have hurt her - the way he seemed to hear this made me think I could go further - perhaps you feel too weird for her to manage, and feel you deserve hurting today.

There followed a rather conflicted period, when he did not seem to know quite what to do with himself or how to use me or the toys. For example, he got the teaset and then the petrol station out, and stood holding them as if not sure what to do with them, use them or throw them. He seemed to feel at a loss, as if he had an idea that some filling up, some nourishment might be available, but he was not at all sure about it. He climbed on top of the cupboard, where he tended to go when he was feeling small, then climbed down again. His mood was slower and more hesitant, not so manic as it had been at similar times in the past. Then the energy levels ramped up, and he pushed himself to and fro on the swivel chair between me and the wall, faster and faster.

He came back towards me with his hands outstretched for me to catch him. As he hurtled to and fro, he said it was a skeleton. I asked what he meant and he said, 'You know, skeleton bobsleigh'. I registered something else dead and asked what happens in that. He said it whizzes along very fast and wins. I wondered about this, and watched him carrying on whizzing to and fro, bashing into the walls and furniture. As he came towards me quite fast, I felt as if he'd have half liked to sit on my lap and half liked to bash against me. I said maybe he didn't know if he wanted me to catch him or wanted to bash into me.

There was certainly something around in this session to do with death. It felt as if it was on the verge of becoming explicit, having first been acted out in a dead body hide and seek position along the radiator - there may have been a link with times he has felt things to be 'too hot' in the room. He then referred to it in the skeleton bobsleigh, which hurtles down steep icy slopes - too cold. It seemed to be connected with the feeling of weirdness he had shown me initially, and with the feeling of ambivalence that seemed to be so much in evidence in this session, represented symbolically by the following material:

He got down and handed me the sellotape to hold. He got the string and cut a long length. He laid it along the desk, and asked me to stick it down. He took the other end and wanted it stuck on top of the cupboard. He sat up there and held one end, then told me to take the desk end and pull, for a tug of war. I said it felt like a real struggle today, maybe he felt pulled two different ways.

Then he got down and said he wanted to make a big den, and I said maybe the struggle felt too much just now - he needed a den. As he made it, he wanted it darker, asking me to make sure the blankets spread as far as possible to block out the light. He also wanted it bigger, so that he had more room inside. He took some paper and his box in with him – the reason why turned out to be so that I wouldn't have anything else to do: 'You're just waiting to see outside'. I said I was not to get interested in anything else while he was in there, he just needed me to watch and wait for him.

He drew something with felt pen and passed it out, saying, 'Postage coming!' On the page was a phallic shape, and inside it a man shooting a gun towards a stickman dead on the ground. He told me the man has killed someone, and told me to pass it in. I passed it to him, saying he was showing me something very serious, the man had killed someone. I wasn't sure how best to take this up, but was aware that he seemed to be more interested in the killer than the victim at this point. I was conscious that the session time was coming to an end. Inside the den, he got on with something I couldn't see, and told me I didn't know what he was doing. I said I just had to wait and see, without knowing what was going on. He had drawn a face 'of the shooting man' in a circle and rubbed green

playdoh on it. I wondered aloud if he was showing us that the shooting had something to do with the 'yucky stuff'?

This session material seemed to link a number of key themes, hide and seek, a feeling of unacceptability expressed in his feeling of weirdness, the den, and a kind of winning that seemed to be life and death. There was a figure emerging as the killer, linked with crime scene material. The figure of the killer was shadowy, although he had drawn a face to represent him. I think there may have been a shadowiness about him because Dan himself was not too clear who was responsible for the killing. He had represented himself as the victim in his 'dead body' hiding place early in the session, as if neglect had killed him; in which case, I as his object was the killer. However, smearing the figure with green playdoh suggested the poohy baby 'yucky stuff', and implied that the guilty party may have been felt to be the bad baby. The identity of the victim was not clear, either. Later material suggested that he felt a tremendous weight of guilt for having left his birth family behind, as if they had had to be killed off in order for him to have a different life.

I elaborate this material briefly here, because it demonstrates the complexity of many aspects of his ambivalence about being taken in, in being adopted, and into psychotherapy, which, he felt, was 'pulling him along' towards something new, and thus inevitably, leaving something behind.

After the 'killer' postage:

He was busy doing something else in there, and I said that when he'd finished, it would be time to end. He cried out with feeling, 'No!' I said it was very hard – he didn't want it to end. He said very definitely, 'No, he wasn't going'. I said he wasn't ready, he was in the middle of showing me something very important, and it was so painful not being able to say when the ending had to happen - it felt cruel of me to chuck him out like that.

It had begun to be apparent that when it did happen that I as the therapist/object was felt to respond in a way he could use and Dan felt himself to be taken into a

relationship he could inhabit, however ambivalently, it was cruelly taken away all too quickly, like the foster placement in which he had begun to settle. The following den material represents this traumatic disruption all too clearly.

Making a den: the 'time bomb'

In session 213, soon after a week's holiday break in the final quarter of the second year:

He began by eagerly showing me a 'gold award' sticker which he said was 'good', and then climbed up to stand on a swivel chair. My thinking aloud about whether good stuff, like getting a gold award, felt risky, prompted him to kneel upside down on the spinning chair.

He started doing gymnastic somersaults, but asked me to protect him, which he has never done before. It felt trusting. He tipped over onto a cushion and repeated it several times.

Then he said he wanted to make a den, explaining that it wasn't about being angry today - a reference to yesterday's den - it was a different sort of den. He asked me to help, and the process felt mostly collaborative. Then he wanted to make sure no light could get in, and began to order me about in a rather tyrannical way. I asked about what it felt like to not have the light shining in, and it seemed to be about being able to rest, without a kind of spotlight glare. This seemed to link with his need to turn a desk light on me sometimes, reversing the inquisition that he can feel therapy to be.

He sat inside and I waited outside. After a minute, he invited me to join him. I asked about a feeling that he might have to entertain me to stop me going away, which he denied. However, it did also feel like a big step for him, inviting me to join him where he was, and so I said thank you, and came in and sat down. He got the tea set out and I wondered aloud if we were seeing the waiter coming out. He said 'No, let's have a cup of tea', which felt more companionable, albeit on his terms. After a little while, though, we were back in the cafe and he was the

cafe owner, offering sausage and chips - he said it was a big sausage. I said maybe he thought I was the kind of person who would only be interested in a big sausage, not a little one, and he agreed. As he sorted out plates and cups and food, I added that maybe he was wondering what he needed to do to keep me interested in him, maybe just sitting here together did not feel like enough - I wondered what he thought might happen if he didn't feed me?

He made no reply, and gathered up the tea things. I said I needed to keep an eye on the time. It was five minutes till the end, and I let him know that. He got up and crashed through the den walls, breaking it up. I said it felt horrible; it was a shock, ending so quickly. He said it was a time bomb. I said just when he was starting to feel someone was with him and there was something good, time was up and it felt like I had set a time bomb - I was chucking him out and everything was destroyed. He hurled himself onto the armchair head first to tumble over it like before, but I was not there this time to protect him, and he hit his leg on the side of the chair. I said it hurt him and I had not been there to catch him.

For Dan, then, endings felt like time bombs. He seemed to feel lured into a cruel trap I had set, whereby I was in control of the timing of the ending, and was only pretending to be fully with him, while really I was getting ready to kick him out if he did not feed me. I think this may have been his unconscious feeling about not only therapy but his adoption, too, where there had been questions about its sustainability. There seemed to be a question around, something like: Can it be good if it ends? Or perhaps, Can it be real if it ends, or does that make it a cruel trick?

I think the balance of delight and deception in being taken in here was a difficult one; and I thought in supervision about the way in which I was being taken into his den. My feeling was of an invitation into his space, which had an element of something delightful, potentially real, though laced with something less in touch with the reality of time and endings and so perhaps deceptive too.

Along with the external disruption of the imminent ending of the session, there was also a sense that any companionable feelings were quickly disturbed by an

internal relationship in which he was not to be 'fed' something of value by someone else. He was to do the feeding, as in the waiter/chef material. To further complicate matters, intertwined in this material are likely to be qualities of the potentially rivalrous relationships between his birth mother, grandmother, and other family carers, internalised in his early years as his developing mind made connections.

Inevitably, then, the process of trying to 'feed' him my attempts to verbalize my understanding of his behaviour, was itself suspect rather than neutral for him. He seems to have experienced it as an attempt to take him in as a confidence trick. However, we were able by this stage to talk about the process of our relationship as he experienced it - for example, what might happen if he didn't feed me, or the feeling that I had set a time bomb which would destroy everything - without it triggering rages or manic behaviour, or a need to get out of the room.

Performance: stuntgirl, the 'murderator' and the empty house

We have seen how, since the very beginning, the presence of a 'show' seemed to be central for Dan. The darker themes behind the show gradually emerged as the work continued, and our relationship was felt to be able to face pain and cruelty aswell as delight. Session 239, coming soon after his eleventh birthday, two years into the work, highlighted the feeling of cruel deprivation behind the show, and an associated wish for murderous revenge.

He straight away went for the motorbikes, saying 'There's going to be a show' He spotted a car with missing wheels and mentioned it, glancing at me now and again with a little smile. He seemed controlled; it felt premeditated and rather ominous, as he set up the stage. The motorbikes usually mean carworld. I was aware that he had had his birthday at the weekend; it had been a very big deal in the run-up, and I wondered what was in his mind. He rummaged through the box of figures, and muttered that the girl was missing. He quickly picked up another girl figure and dismissed the problem of the missing girl. I said he was hurrying on, but things did seem to be missing today, first the wheels and now

the girl. He got hurriedly on with the show, trying to distract my attention. I said maybe he was showing me he felt he just had to move on very quickly and not notice when something was missing.

Engrossed with the figures, he talked in the girl's voice about being afraid to do stunts. A firm voice answered her: 'You have to do it anyway'. Her worries about doing it without her mummy, or head protection, or practice, were disregarded. I said he seemed to be showing me a world that was very frightening for children, where they had to manage without protection, there was no choice. The girl had to do a daring jump anyway, off the end of the table – she did survive, but she hated it and was very angry and protested.

I said she hated being made to do such dangerous things and was furious about it. I added that I wondered if perhaps he was showing me something about being here after his birthday and what it felt like to him. Perhaps there was something scary, or missing, for him. He talked over me as I said this, and seemed to hate me for it. I said we seemed to be out of touch today – he wanted me to just watch the performance, but it was a way of us not really talking. I thought there was something really bothering him, but whatever it was, he didn't want me to notice. The point seemed to be that I was not to notice what I was putting him through.

The stunts got more and more daring. He constructed a series of ramps, saying it was the murderator, and put the girl on it. I was shocked – it seemed cruel. I said it looked like a stunt but it was actually deadly – she could be murdered. He made her skate down it and manage it, but it was an omnipotent, 'carworld' managing. He made her leap high in the air and twist round against the wall, dropping vertically to land on the floor unharmed.

I think the 'murderator' was the focus for a constellation of external and internal feelings and relationships. It seemed to me that the stuntgirl stood for a more vulnerable part of himself, forced by me in the transference to perform terrifying feats in leaping over deadly drops between sessions without head protection. I think it likely that a part of him would have liked me to be the girl on the

murderator, too, getting a taste of my own medicine. It may have been that she also stood for his adoptive sister, born into the family, seen by him as the favoured child, and subject to his almost continual covert sabotage. He also liked and admired her, and although her safe landing was not entirely convincing, she was spared death on the murderator. Perhaps at some level he did feel, too, that the more tender parts of himself would survive our relationship.

Other stunts followed, involving jumping over emergency vehicles with the fire engine ladder extended to make it harder. My remarks about jumping over something that's normally there to rescue people were ignored and again, I think, felt to be infuriating. He dangled the petrol station from the end of the fire engine ladder – it felt horrible. I said he was making sure nothing was going to be filled up from that petrol station. I felt the same thing was happening between us, and tried to put that into words – not only his lack of expectation that someone would be able to help, but his active prevention of that happening.

Looking back, the point seems to have been that I was to notice that I did not notice what I was putting him through. Had I clearly apprehended this at the time, the problem of how to communicate it in the session would have arisen. In the terms of this thesis, it raises the question of how to take in the feeling of not having been taken in, and exposed to extreme risk?

As the session went on, I felt more and more hopeless, and silenced. I couldn't find a way of talking to him about it that was the least bit helpful. My attempts seemed to escalate the feeling of cold cruel danger.

There followed a chaotically confused and confusing account of a series of events, in which it was hard to know who was who. Police were involved, children had to persuade unreliable adults to give them a home, and once in the house, the girl hung upside down on her bike from the roof. I said it was a very cruel, upside down, mixed up world he was showing us, where you couldn't rely on anyone to help and children could be killed. He said with a grim satisfaction, yes, it was his world.

Then he brought over the fire engine, with its ladder up, and got the police woman to climb it. I felt relief, and the possibility of some sort of order, but also concern about an inspection that could be judgmental. She got into the house, followed by a policeman, and said it was an empty house. This felt very bleak, and coming right at the end of the session made it feel even bleaker.

It seems that behind the show and the extreme cruelty of the murderer was the bleak empty house, which links with the idea of something missing from the beginning of the session. He was showing us both a world in which children could be killed, which links with the death material in previous sessions. My difficulty in reaching him in this world, which he said was his world, is apparent in the session material, and was perhaps illustrated by the policewoman climbing such a long ladder into the house, but it was very hard to think about while it was happening. I felt that anything I said, or even thought, exacerbated the feeling of cruelty - as if my attempts to understand were part of the problem for him, and the 'show' was his protection. I realised and said that he seemed to be showing me a frightening world where children had to manage without head protection, but did not fully link it to his relationship with me, which seemed to put him in just that situation. In fact he used the symbol of a climber with no ropes in a sequence of play after a year's therapy, to show just how deadly was the drop between sessions. My dilemma was that keeping my comments in the play seemed to avoid responsibility for the situation in the room, but mentioning this directly felt inflammatory. I think he wanted to communicate the feeling that no-one was there to help with the appalling cruelty, and so my efforts to notice and help were profoundly frustrating, maddening, even. Perhaps there is a link with his cry right at the beginning in response to my attempts to name the desperation: 'No - the lady can't see it!'

Furthermore, given that this session took place just after his birthday, I think the bleak emptiness and sense of something missing may have been focused around my representation of the missing and neglectful birth mother in not being present. Perhaps he was wrestling internally, on the cusp of Bion's development: 'Sooner or later the 'wanted' breast is felt as an 'idea of a breast missing' and not as a bad breast present' (1962:34). But the extremity of his

early experience, coupled with his fury, seems to have been too much for him and tipped him towards the persecutory end of this spectrum. If so, this would have made me both perpetrator and inspector - no wonder he was not amenable to hearing what I had to say. Perhaps my attempts to understand felt cruel in that he may have experienced them as like a police investigation designed to expose his emptiness and subject him to the feeling of bleakness, something like rubbing a dog's nose in its mess - when it was actually my fault. Given the switch between police cars and cooking utensils in his internal world that he showed me in the very first week, he may have experienced my 'feeding' as a cover-up for police surveillance.

Being taken in: the abandoned dog and the show

In what he said was his world, the exposure of need was followed by cruelty, rather than hope of rescue. Returning to the idea of rescue that was explicitly introduced in the 'Where were you?' session, and linking it to the need for a cover-up 'show', I would now like to turn to Dan's use of a dog motif. There was a little soft toy dog in the box of play materials I had provided for him, and this dog would often be thrown and kicked around in sessions. It seemed to represent the kicked around part of him, with which he would not explicitly identify. This was understandable, if in his world need evoked cruel responses. If there was any kicking around, he wanted to be on the kicking side, not the kicked. I once to my shame inadvertently called him by his family dog's name, which is similar to his own. I thought of the sharp pang of shame as mine, but then wondered if I may also have been picking up on his non-verbal cues. Perhaps it related to the 'remarkable thing' (Freud, 1915) of unconscious-to-unconscious communication, that we might now call empathy. This is substantiated in Schore's (2003) right-brain-to-right-brain channel of communication, allowing us to feel undercurrents of feeling running below the words.

In session 242, two and a quarter years into the work, he used the symbol of a dog to convey some powerful feelings of hurt and abandonment, and for the first time, the dawning hope of a sustained compassionate response.

I was a few minutes late to collect him. In the room, he told me Thursday was going to be a sad day - his dog was 'getting it cut off'. I thought of Dan's own emerging manliness. I asked why, and he said he was humping everything. Very soon, he started to tell me about a sad, abandoned dog that he'd seen in a hot country, and how he dreamt about him and wanted to go and rescue him. I wondered aloud if the two dogs might be linked in his mind, the one that humps everything, and the one that is abandoned. It was a bit like how I was late, just when he was wanting to see me.

We talked for some time about the pain of the abandoned dog, until Dan shook his head and said not to talk about him any more. 'Too painful and sad?' I asked, and he said yes, he hated to think of it. I agreed that it was very painful to think about - maybe he needed me to just keep it in my mind? He said yes, but went back to the subject, and the practicalities of taking care of him. This felt like something new in our sessions, and I was heartened. He pictured himself, first alone when he was older, and then with mum and dad as back-up, going to find him and any other dogs who were abandoned, to rescue them and give them a home and proper food. He said not to talk about it any more. There was a pause, and then he said, 'but I think about him at night'. We said nothing for a moment, and I felt we were both picturing the poor dog, and feeling the sadness of it. He said he had barbed wire marks on him. I thought of the hurt, abandoned dog in Dan, and said he felt the marks of cruelty on him were still there.

He took out a picture from last session, in which he was lead singer in a stadium performance, and added the dog, high in the air above the stage. I thought of going from abandoned to on high, zero to hero, as it were. It reminded me of his performances, and of his practising this week for a drama company show.

We seemed by this stage in the work to be able to feel the sadness of the abandoned dog together, although it was painful, and talk about my disappointing him in a more regulated, less explosive way. His attempts to celebrate the dog in a compensatory way may have had shades of omnipotence about it, placing him up there above the stage, but it felt a very different place

from carworld and the murderer - particularly as he is genuinely a talented performer.

He knelt right by me as we worked on the picture, and it felt quite close in a companionable way. He added a superman cape to the dog. I said, 'Do you think he wants to feel really special like superman, to make up for feeling so low?' He made a 'maybe' face. 'But what do you think it feels like for him up there above the others?' I asked. 'He likes it up there', he told me. I suggested that maybe it was pretty exciting up there, but I wondered where he went when he wanted a bit of calm? He said, 'On the toilet with the paper'. I thought of an identification with his father, and of his early remark about getting it cut off, and said 'Hm, a bit like dad?' and Dan said yeah. Thinking of him alone in there, like he used to be in his hiding place in the cupboard, I added that maybe it was hard for him to find a calm place when other people were around, it sometimes felt like he was either performing, or else he had to go to the toilet to get rid of stuff and be on his own.

He moved away to work on his own, and said, 'Don't be offended'. I said he was worried that I'd be hurt if he moved away to be on his own, and talked about this calmer on your own on the toilet feeling. I mentioned the big eye that he had drawn behind the stage, 'Someone's eye is on you - mine?' I asked, and wondered how it felt, being watched. He said it was good and bad. This had the feeling of a mixture, rather than the maddening chaos of earlier sessions.

He got the 'cool' shared pens that he prefers to the ones in his box. They usually carry overtones of disappointment and resentment, because I have never bought some of them for him, even though I know he would like me to. He gave me a look of silent reproach, which I took. Then he found an old stormy lightning picture of his as the template for a zigzag easter egg drawing, which he said he wanted to be joint, not just him.

The dog motif in this session seemed to be used to exemplify first the cruel neglect, then a dawning sense of hope of a compassionate response. After thinking about the isolation of the show, which has been his way of countering

the neglect, there seemed to come a more real sense of wanting something joint, which brought joyful possibilities, the easter egg with its transformed stormy patterns. This seemed to represent a growing capacity for emotional regulation - his wild stormy feelings could be survived between us, and so were less terrifying in his own mind; they had not destroyed everything in their wake. There was the potential for something new between us in his mental landscape, represented by the easter egg. My role seemed to be more background than foreground now:

It turned out that my part was to be nearby and take an interest. He sat back proudly looking at the egg he had drawn, and the idea of chicks hatching came to mind. I could feel that it looked beautiful to both of us. I said how beautiful it was, and added something about new life coming out of eggs. I asked if he felt proud of it. He told me that he didn't feel especially proud, because it was just natural to him, but in my mind it was something to be proud of.

I felt touched that he was acknowledging the world of our relationship, in which I would be proud of what he did, rather than still living in the world in which what he did was not valued, as in some of the earlier postage material, which he felt was rubbish. This progress seemed to be consolidated a month later, in session 255, when I had been delayed getting to a session immediately after a week's break, but we were able to manage to regulate the emotional impact of this between us. As we have seen, waiting has triggered life and death anxieties in previous stages of the therapy, and there was still a worry that this might happen:

Although he was agitated, and wanted me to be quiet in case things got ruined, he was able to let me say very gently that although he didn't like me talking about it, I thought it would be good if I could ask what needed to happen? He paused and looked at me, half reproachfully, half hopefully. Should I have tried harder to get to him quicker? I asked. He said Yes, in a resolved way, and it seemed to give him some relief. He then drew what he said was 'a quiet volcano', with smoke instead of lava, and said it was erupting. I said he was angry and upset, but it did not seem to be ruining everything this time. The final

effect of the drawing was rather fragmented, but there was a defined landscape, with features other than the volcano.

In the earliest stages of the work, I was unable to put into words much of the complexity of feeling evoked in sessions. Following Stern (2004), it may be that this was an essential part of the repair work of the therapy, and meant that we were more in the present moment together, than if I had too quickly stepped outside it for the third-person perspective. In Klein's (1935) terms, it may have meant that I was felt to be more able to survive his attacks on me, and perhaps the lack of the immediate protection of a carapace of 'understanding' helped him feel sometimes that I had emotionally taken in the full force of what he was giving me. This early stage of implicit communication seems to have laid the foundations for later work in which the relationship could begin to endure feelings of exposure or exclusion evoked by the third perspective of the explicit apprehension of feeling states. We could reflect together on our relationship, and could acknowledge my disappointing him, without destructive eruption. There was still an emotional volcano, but it was 'a quiet volcano', with smoke instead of lava, and room for other things in the landscape.

Hide and seek: 'I wanted to give you a heart attack'

After three years of work, we had scaled down to twice weekly sessions, because he was now settled in secondary school, had the first term there under his belt, and wanted not to miss his favourite subject, games, which clashed with our third session. After three months of this phase of weaning, for similar reasons, we were due to reduce to once weekly sessions for the final term. I would not say that he had entirely internalised a capacity for emotional regulation; indeed, sometimes it felt as though no progress had been made.

Session 374, for example, began with him throwing things at me, then laying across my chair and another, feeling very cold and lonely, but not able to take any comfort. I felt desolate myself, as if it was all in vain and we were back to square one. Noticing this, I thought it might be a communication about how Dan was feeling too:

I said that he went to a dark dead place when I didn't come and get him, and he felt I'd been cruel. He laughed in a cruel way, and went towards the door. I felt desperately sad as if it was all no use. I did not think he could hear about this sad feeling in his present state of mind. I decided it would be more productive to take up the feeling of cruelty in relation to what he may have felt I was feeling. I said he felt I was laughing at him somewhere else, knowing he needed me but not caring and laughing at his hurt. I said I thought it made him feel he has got to get his own back and be cruel too, to give me a taste of my own medicine. 'Yes!' he said vehemently and came over to crouch behind my chair.

The difference at this later stage, after nearly 400 hours of trying to tune into his states of mind and feeling, seemed to be that he hoped I might be able to do it, and was prepared to let me try. His world view seemed now to include a relationship in which someone would make this attempt, and might sometimes succeed in resonating with and naming his emotional experience, so that it was more joint, rather than entirely his alone to bear. In the face of the cruelty we were talking about and feeling, he crouched behind my chair, which seemed to offer him some sort of protection.

Session 378 was the last before we reduced to once weekly sessions for the last term of therapy - a kind of rehearsal of ending altogether, and rather than triggering a retreat into old patterns, there seemed to be a new development:

He talked about a drumming group he was in, four of them together, which sounded like a development, but also felt staged, like a cover story for drumming during this session and blocking me out, which he then did. I talked about how this was good news but also a cover story, a smoke screen for a deeper feeling. I said I thought he feared I might mess it up by talking about his feelings and winding him up so that the last session was spoiled. He said, 'I'll hurt you if you don't do what I say'. I said this was not so much a threat as a worry, and then said there was a question, Is this a world where that's how we're together? He visibly slackened and said slowly that this was a world about 'care - love - cuddles', that he now had with mum, and I said he felt there were

loving things in this world. He told me crossly though, 'You planned it'. I said he felt it was my fault it was ending, I planned it, and he felt there was a risk this would ruin the loving things.

He revisited the den, wanting me to make it with him. It felt imperious, and tricky. I said I felt he needed me to stay in one place today, but he pulled me quite hard, saying, 'I can't do it without you!' I didn't join in, but talked about the fear that he won't be able to do it without me, taking seriously the cruelty implied by the question, how can I know that and still go? From inside the den, he passed me out postage, which said, 'Wish you happy Thursday'. I said maybe part of him wanted me to be happy, but maybe he wondered what I was going to be doing without him on Thursdays - was I happy to be without him? He passed me another note which said 'thank you', and I felt touched. Right at the end, he ran out and hid in a familiar place, and when I found him, he said, like a toddler who is loved and can afford to be petulant: 'How come you always find me? I wanted to give you a heart attack!' I felt warm towards him, and said, 'Is that what you need to do to get into my heart?' He smiled, and I felt that he had a hope that he was already there.

In this session, we were able to make explicit between us the fear of cruel hurt that was part of his early world and also part of his present experience of me. In making it explicit, which he feared in itself in case it triggered an outburst from him, I was drawing attention to the world view it embodied. I think I was helped in this by the preceding months and years of sessions in which I had 'taken in' his world implicitly and experienced something of the nature of the pain of it, in our relationship. His relief and slowing down in response to my question, 'Is this a world where that's how we're together?' showed that he could now step outside it, so that he was less caught up in its stormy emotion.

By the end of this session, Dan was showing awareness of his own state of mind: 'I wanted to give you a heart attack!' He was able now to conceive of a world in which his desire to give me a shock when I could not find him would be received without retaliation - would in fact charm, which it did. It was predicated on his faith in my wish not to lose him - even while he also felt reproachful that

'you planned it!' (ie., the ending). There was no need on this occasion for the cover-up show of earlier times. In neurobiological terms, Dan was now able to route experience through the pre-frontal cortex, rather than responding immediately with the 'automatic pilot' of his early wired-in template.

By the time we finished working together, he had begun to internalise a capacity for emotional regulation that we had together begun to establish in the 405 hours of psychoanalytic psychotherapy. Furthermore, he could be aware of and reflect upon the qualities of our relationship as it happened, so that he was less triggered by aspects of it that reminded him of his early experience. Had it been possible, I think once weekly sessions for a further year might have been helpful, running alongside the challenges of his daily life at home and in school, but this was ruled out by external circumstances. Another 40-50 hours of the emotional regulation and reflexivity provided by psychoanalytic psychotherapy may have been helpful in more firmly establishing these capacities in him, especially with adolescence on the horizon, now that he was twelve. However, as I hope to have shown, over the course of three year thrice-weekly psychoanalytic psychotherapy, he did seem to have been able to make new connections, developing the emotional processing capacities of his mind in a way that reflected the qualities of our relationship as he experienced it.

I will now turn to an evaluation of the qualities that may have facilitated such a development.

Research evaluation

Emanuel (2004) writes, of a frightened, attacking child patient, that:

the non declarative emotional memory of past traumatic events, including body changes, the draining of facial colour, widening eyes and (presumed) increased heart rate amongst other things, meant that he was again, in the here-and-now, in the presence of a dangerous man. (Emanuel, 2004:75)

In much of the clinical material above, Dan's behaviour was likewise indicative of a physical and emotional response belonging to the past but experienced in the present, triggered by events in the present moment; in his case, often absences and endings. Developments in understanding of the neurobiology of human development have much to teach us about this process and the implications for child psychotherapy.

One key aspect of this is the intersubjective neurobiology of affect regulation, touched on in the literature review, which describes in physiological terms the processes Bion and Winnicott refer to as containment or holding. The significance of this process for this study is that in maintaining equilibrium through relationship, a child can learn from experience. The less he has had of physical and psychic holding, the more this will need to be maintained through an external relationship. More and more, as Dan's therapy progressed, he taught me that interpretation was not enough to maintain equilibrium. In fact, he made that clear from the beginning, but I was slow to learn, because of the template I had in mind. If anything, when his fear response was aroused, interpretation tended to have the opposite effect, and made his struggles to stay connected almost insurmountable. No wonder he was angry with me. He needed me instead to be aware of his physical state as a guide to his emotional state of mind, and act as a processing capacity to help with emotional regulation. When I was able to help with this regulation, he could begin to process emotion through first my mind and then his mind: his developing pre-frontal cortex could gradually be brought into action to evaluate the stimulus, using past experience (Pally, 2000). Without this regulation, his body was

triggered into fright/flight responses which bypassed cortical or hippocampal functions which could mediate the response. He had to get out of the room. This was not negotiable for him, and I was mistaken when I behaved as though it was. In fact, treating it like a choice was likely to have retrospectively compounded his sense of his own badness. It became apparent that the longer processing route, involving the orbito-frontal cortex, seat of emotional connectedness and relationship, could only be accessed in calmer frames of mind - not under threat. When regulation occurs, connection is possible – and we can take in new experience.

When Dan's body memory was triggered by something in the session, and I clung in my confusion to the tenets of psychoanalytic psychotherapy as I saw them and felt the need to interpret content, I think this was unhelpful. Divinio and Moore (2010) point out the role of implicit memory in attachment processes, laying down embodied memories not available to conscious thought. The dominance of the right hemisphere for the first two to three years of life means that infants develop patterns of emotional communication before developing left hemisphere based language skills later, around the third year. These patterns of emotional communication, set in relationship, experience dependent, are not revised by left hemisphere based language skills, having been wired in largely before the left hemisphere develops. They need moderating by right hemisphere processes. Not all language skills, however, are based in the left hemisphere. Interestingly, those to do with the musicality of speech are situated in the right hemisphere. McGilchrist points out that many subtle aspects of language, such as 'pitch, intonation, volume, rhythm and phrasing' are 'mediated by regions of the right hemisphere which also mediate the performance and experience of music' (2010:102).

Attunement, musicality and emotional regulation

Malloch and Trevarthen (2008) explain the psychobiology of musicality in mother-infant proto-conversation, and indeed the intrinsically musical nature of human interaction, involving rhythm, timing, pulse, voice timbre, and gesture. They illuminate the profound implications of this process for psychotherapy. I

found through experience with Dan that questions of rhythm, timing, tone, phrasing, lilt, pace, intensity and volume were decisive in making my responses inflammatory, which would trigger an outburst, or regulating, which would facilitate contact between us.

Interestingly in relation to this, Dan would often get the ball out of his box and we would send it to and fro between us when he could not talk and needed regulation. This was not explicitly decided by me or Dan, or negotiated verbally between us. Instead, it developed from a session in the first week, when he was kicking the ball ferociously at the window, and I caught it and threw it to him, and a to and fro game emerged, which seemed to settle him, while my attempts to comment on what he was doing inflamed him. Late in the therapy, I could notice out loud that the ball had come out and wonder about what he might need it for. I could also mention that the football often seemed to express a feeling of being kicked around which he would have liked to take out on me, but the ball got it instead. Saying this kind of thing in the early days, when all the force of feeling was still lodged in his body, had the effect of escalating his difficulties in regulation. However, later on, as I hope to have demonstrated, the processing capacity of his orbitofrontal cortex developed in the therapeutic relationship, and we could begin to use language between us to reflect the process that was happening between us. This seemed to grow out of the more right hemisphere based intuitive resonant attunement.

Another rather musical than verbal communication that developed between us was a drumming rhythm. He would tap on a table or the arm of a chair, and I would echo his rhythm, and we would build up an increasingly complex call and response which we both enjoyed, and which seemed to restore his equilibrium. In fact, he joined a drumming group towards the end of the therapy, which seemed to meet the need for emotional expression in a creative way. It was evident that rhythm, rhythmic throwing of the ball to and fro, or drumming rhythms, helped regulate him and restore a kind of equilibrium when he was unsettled. This is not to say that these activities were only to do with regulation; they accrued many and various functions and associations in sessions - but early on, they were a way of helping him regulate powerful emotional states that

might otherwise have meant a breakdown of communication. The timing of this was important, though. Too late was no use at all. Once physically triggered into violent reaction, no throwing to and fro or drumming helped.

There were times, too, later on, when the outbursts felt rather different. Towards the end of the therapy, as he hurled things at me from a position on top of the cupboard, the feelings in the room sometimes had a quality of stuckness, rather than rage or fear. On one such occasion, I encouraged him to think with me what might be going on. He answered: 'No! This is when you tell me what I'm showing you!' I could not help but smile, and said I thought perhaps he could help me with that now. He did not agree, but he did climb down and stop throwing things, and we did talk about how much he hated me sometimes. This seemed to be not so much about emotional regulation, for he was within his own control, self-regulated in being able to answer me thoughtfully though crossly and climb down. Perhaps we were seeing the sequel to the founding process of emotional regulation: the capacity to rely on someone else to suggest meaning when things feel meaningless and stuck. Alvarez (2012) writes about three levels of work in psychoanalytic psychotherapy with children: an explanatory level, involving 'why-because' explorations, a descriptive level that has to do with the 'whatness' of experience, and an intensified vitalizing level for children who are out of reach. Perhaps the musicality of emotional regulation belongs to all three, but without it in the foundational stage of a child's life or a disturbed child's therapy, it would seem that progress towards the other stages cannot be made.

Body language and narrative awareness

When child psychotherapy literature refers to containment, it refers not only to a verbal, static process but to a feeling, dynamic process - or rather, perhaps more accurately, to an interaction between the two. Alvarez (1997), as discussed earlier, has written much about the need for the therapist working with deprived, abused and neglected children to contain, experience and explore difficult feelings that arise in sessions, rather than comment on them too quickly. She uses the language of 'projections' and 'projective identification' (Klein,

1946) to represent the powerful emotional communications that are felt to be aimed at the therapist by such children – emotions seeking a mind to contain them, in Bion's terms, much as an infant directs emotion at the mother. There are examples of this in the clinical material above, for example the pooh-pizza and the murky waters sessions, when I was aware of being left with powerful feelings that were not explicitly addressed in the session. She explains 'how very pressuring projections may include a need to communicate something that may require lengthy containment and exploration in the analyst and should not be shoved back too prematurely at the patient' (Alvarez, 1997:755).

This desperate need to communicate something that needs lengthy containment is explicable in terms of neuroscience. Children who have been subject to early trauma, almost by definition without a mind to help regulate and process the emotional fallout, desperately, doubly, need someone to help them process primitive emotion, so that their mind can begin to make new connections, and develop the capacity to begin to process powerful feelings for themselves. Hurry's (1998) work relates to this issue, and offers a conception of developmentally-informed therapy. She suggests that the interactions of the therapeutic relationship are essentially similar to those that would take place between parent and child, and sees the spontaneity of the therapist as crucial in this - when we are, she suggests, 'more evidently "ourselves" than in our interpretive role' (1998:53). This relates to Stern's emphasis on vitality (2010), on the here and now, and moments of meeting (2004).

It would seem that the authenticity of the active, lively process of emotionally-resonant containment is a vital part of the work of developing a mind. In therapy with children who have not had this relational experience, Hurry (1998), Alvarez (1985), Green (2003), Music (2010) and others writing in the child psychotherapy tradition argue that a developmental element is inevitable and important. The child patient must feel recognised, that is, met and responded to in the hitherto often fragmented aspects of his nature. Furthermore, Meltzer (1976) has taught us that good technique involves attention to process; finding a way of speaking about previously unacknowledged aspects of the self or of self experience to the child at the right temperature and distance, guided by our

countertransference about what the child can bear and use in a developmental way.

The form this processing help needs to take is determined by the child's state of mind, or level of development. I have tried to show how, in the work with Dan, the regulating help he needed, especially but not only early on, was largely non-verbal, or rather, rooted in the musicality and rhythm of right hemisphere based pre-speech - Trevarthen's (1993) 'proto-conversation'. He had an energetic performed vitality, but needed me to tune in to the states of feeling that lay behind the show. I had to do this first through body language.

Beyond this, Dan then needed help with beginning to form these felt body states into a coherent narrative, as we saw in the 'Where were you?' session. Rosenfeld's stress on the auxiliary ego function of the analyst (1972) suggests it is important that some dramatization of the emotional meaning is present in the therapist's voice, in order for the full significance of interpretations to be taken in. If we are to undertake the fundamental ego functions of identifying emotions for children who have not been helped to develop this capacity by someone who could put themselves in their shoes, we need to do it with feeling.

I have referred to Alvarez's (2012) three levels of work in child psychotherapy, which range from higher level interpretation of parts of the self that the child may be unaware of, which involves pre-frontal cortex processing, through something more primitive, to do with the 'whatness' of states of feeling, to a deeper, intensified vitalizing level more like reclamation, when things are very desperate. All of these levels were integral to working with Dan. For example, his early neglect meant that he despaired of being wanted, and did need me to reclaim for him the hopeful feeling that there might be joy in his presence, powerfully expressed after six months in his 'You say Wow!' It was also implied in his 'How come you always find me? I wanted to give you a heart attack!' to do with the feeling I might have lost him, right at the end. At other times, he needed my help with the whatness of experience, which he conveyed as confusing and chaotic. He had no way of knowing what he was feeling. The absence of a framing relationship had itself constituted a template for relating, which consisted of

frightening, unpredictable, disorganised experience, where anything good came to a sudden end and he feared that he himself was a bad baby who had brought this about. Sometimes, too, what Alvarez calls 'why-because' interpretations were necessary, to draw attention to patterns of relating that emerged. This involved thinking about the process of relating that was happening in the room, and what it might represent for him - a reflexive attitude, which constitutes Britton's sideways step outside the world of the child's early experience, and is supported by supervision. Dan found it intolerable to begin with, although for the therapist it represents survival and development and is crucial for progress in the therapy. Technically, then, I needed to move between levels as we explored his internal world and in the process, co-constructed a new one.

In the new world of the therapeutic relationship, I do not think that the fears about absence and his own survival, or fears about his own badness or his object's had been removed, but along with these, there did seem to be the dawning hope of someone enjoying him and wanting to be with him, not in a compliant performance but in a more lively, love-and-hate, real way. There seemed to be room now in his mind for someone to be alongside him, first in his den, when he invited me in, and then eventually, I hope, on his journey through life. The clinical material supports this hope. There was a progress from body language, implicit memory of something disturbing, towards a narrative involving danger survived. Stories Dan wrote began, as we have seen, with 'postage' of a newspaper report involving our two names, in which, tellingly, the rest of the words were missing, represented by squiggles. The notion of two people together in Dan's internal world to begin with implied something criminal and disturbing, headline news, but without the words to explain it, just squiggles. By the end of the second year, he was writing stories, often also crime-related, but in a less chaotic, fragmentary way. In the middle of the third year of therapy, he wrote an illustrated story of a boy and his companion on a series of adventures. The idea of two people together had lost its sense of disturbing wrongness and confusion. Instead, it had something light-hearted about it, and although some of the adventures were scary in places, the travellers survived to tell the tale. I think this bodes well for his outside world relationships.

Whilst true, this account may convey a sense of a smoother progress than we experienced on our journey. Things were often very difficult for both of us in the session room, and as I have mentioned, the timing of the ending was not of my choosing. My contract was coming to an end, and although Dan wanted to stop, or rather, part of him wanted to stop, there were other parts, as we have seen, that feared not being able to cope once therapy ended. I think he was probably on the verge of or a little way into Alvarez's higher level of work, 'explanatory level conditions', which she suggests 'involves a capacity for two-tracked thinking/feeling' (2012:4). This capacity seems to grow out of a relationship in which the child's feeling is thought about, and in which the relationship in which this happens can be thought about - the reflexivity that is central to psychoanalytic psychotherapy. I think it would consolidate the capacity for two-tracked thinking/feeling for someone in Dan's situation, if he were able to continue to have access to the therapeutic relationship as he went through adolescence.

However, my hope is that the therapeutic relationship has at least been felt to get to know through attunement and so contain to some extent the world of the framing relationship in which Dan's template for relating was set. We were able to feel, and to explicitly acknowledge together by the end, the ways in which he felt I was cruel, and the ways in which I had let him down, without those admissions triggering primitive fears and responses belonging to his early years. His onward progress may be challenged by adolescence, but at the time of writing, continuing parent work has meant that I have heard that things are going well, and his mother has recently described him as being more thoughtful. The emotional regulation and reflexive attitude of 405 hours of psychoanalytic psychotherapy seems to have facilitated the potential to introduce awareness between the impulse and the action: 'This is when you tell me what I'm showing you!'. I hope our work together has begun to establish in him an internal relationship in which he can reflect on the feeling of what happens, and tell himself, or at least think about what he might be showing the 'you' in his mind.

Conclusions

This research has been aimed at addressing the question of how psychoanalytic psychotherapy can help an adopted child develop better relationships. How is it that an adopted child's template for relating, adapted to adversity, can be helped to develop new connections? Behind this lies the question I asked in the Introduction: how can you change if change happens through emotional regulation in intersubjective relationship and you experience the mechanism of change, the relationship itself, as suspect - even dangerous?

In researching this question, I have shown through findings from neuroscience and child development studies how minds develop through emotional regulation in an attuned relationship, wiring in neural connections that establish a template for relating. Children's minds are stunted and damaged when this attuned relationship is not available, which furthermore, affects their very capacity to take in new experience. The studies I have referred to support the view that the process of psychoanalytic psychotherapy, working by the same intersubjective process in which the brain was wired early on, is potentially a mechanism of change for two key reasons. The first is that psychotherapy offers an attuned relationship sensitive to emotional regulation, which as we have seen in the clinical material, is an essential element of change for disturbed children. The second is that the reflexive nature of psychoanalytic psychotherapy offers, possibly uniquely, a context that can address the problem that the very mechanism of change, the relationship, is itself suspect. There is an axiom in the world of adoption that 'love is not enough'. Gerhardt (2004) tells us why love matters, but unless we can also bear to allow hate and fear into the relationship without retaliation, as psychoanalytic thinkers like Klein, Winnicott and Bion have long taught, we are leaving out the child's unconscious or episodic memory template for relating, and so are likely to effect no change.

I will summarise these two key aspects of change in the process of psychoanalytic psychotherapy, emotional regulation and reflexivity, after considering the over-arching concept of the framing relationship, which potentially contains both aspects.

The framing relationship: worlds within worlds

In the literature review and elsewhere, I have suggested that the idea of the framing relationship seems to be key to this question of facilitating change. It applies to how the child was understood and then understands his own being and experience, initially in the context of the mothering relationship and then secondly in the context of the psychotherapeutic relationship. In the clinical material, I have tried to show how, mainly through physical and emotional communications, Dan took me into his world, in which I was experienced as a cruel and neglectful figure who must be placated - not only, and not always, but in essence. Unless I found a way to include this essential experience in our relationship, rather than insist on the caregiving nature of the therapy, I think the therapy would have replayed his neglect. Another way of putting this would be to say that the world of the first relationship has to be taken into the world of the second, in the child's experience of the session. In psychoanalytic terms, this is the concept of transference.

Talking about it as a world view is a way of emphasizing that, instead of showing me a relationship in which one person treats another in a particular way - with scorn, for example, when they are hurt, I felt that Dan was showing me a world in which that was the prevailing order. This seemed to be a fuller formulation of the predicament - altogether a more terrible situation. Nothing outside that frame of reference is felt to exist; all experience is apprehended in that way, and protective responses are triggered in response to perceived threat. This is where the emotional qualities of the process, the mutual resonance, the musicality of the exchange, come in. These are critical in maintaining or restoring the equilibrium in which minds can change. Under threat, people have evolved to react speedily - mindlessly, without the time-consuming business of thinking.

All too often, Dan experienced therapy as a threat, so that he approached sessions with the fear of being triggered into an outburst because of my

insistence on naming what I thought was going on, when his capacity to process emotion was not sufficiently developed, and he had strong suspicions about what he was being taken into. There is a delicate balance to be struck here, for not naming whatever is being kept outside the frame of reference can seem to collude with the old pattern of relating. Dan's 'No! The lady can't see it!' seemed to be an urgent request not to comment from the sidelines, as it were, but to agree to step into the old frame of reference, the world of his early experience. It may be that it is necessary to live in this world with the child for a while, in order to get to know it experientially. This process itself offers a new world view, a new framework in which there is an attempt to understand. This new framework thus can experientially contain the old order but is not defined by it. In this new framework, there is space to step outside the old world order and walk around it.

In this study, I have tried to show how this new territory is made by the process of the therapeutic relationship itself, just as the ways of relating in the early relationship wire in the constellation of connections that constitutes a world map of relating for the young child. Wiring in new connections, then, is like making a road as you travel it. I have tried to examine how this happens intersubjectively, through the co-construction of meaningful new connections in a therapeutic relationship which re-frames experience. Through this relational experience a new map, a new template for relating, is laid down. I will now summarise the conclusions I have drawn about the two key aspects of the therapeutic relationship which facilitate the creation of the new template for relating: emotional regulation and reflexivity.

Emotional regulation through attunement

It is evident from the clinical material that Dan's early template, adapted to adversity, was applied to the present moment in therapy sessions, especially but not only early on in the therapy, and particularly when he felt under threat. In looking at which qualities of the process of Dan's psychotherapy were helpful in facilitating change towards the better outside world relationships that he does seem now to enjoy, one conclusion seems to be that he needed emotional regulation, if any new connections were to be formed. This emotional regulation

involved sensitivity to the timing, distance and temperature (Meltzer, 1976) of interventions, verbal or non-verbal, and to the level of work (Alvarez, 2012). This is not to say that these had to be spot on every time, fortunately! On the contrary, sensitivity to these aspects often meant noticing my own mistakes in this regard. Stern (1985) and others elucidate the importance of the rupture and repair cycle; Green highlights 'the creative possibilities of a breach' (2003:18), linked to reflecting on the countertransference experience of a disturbing and potentially destabilising emotion.

The different qualities of the intervention process can themselves be at odds, of course, some more successful than others. In terms of timing, for example, the sudden ending after the close moment in the 'time bomb' session, needed a slower lead-up than I was able to offer at the time. However, when I talked about his feeling that whenever someone was with him and there was something good, time was up and it felt like I had set a time bomb, I think my tone of voice conveyed enough attunement for him to bear it. He did hurl himself onto the armchair head first in response, and hurt his leg, but this felt like a calmer enactment than many of our endings. He did not have to leave the room, or trash it. He was able then to hear me say gently that it hurt him and I had not been there to catch him, and this mollified him.

It will be apparent that he was only able to achieve a degree of emotional regulation once that function had been undertaken by his therapist for quite some time. As we have seen from the neuroscience, this involved using right hemisphere responses to his bodily cues. The whole right hemisphere is involved in mother-infant interaction, and this is where the internal working model of attachment is stored (Balbernie, 2013, personal communication). It cannot be accessed through interpretative words in themselves. In fact, using wordy, left hemisphere based responses, especially but not only in the early days, was often counter-productive.

Schore's work gives us the tools for understanding this, as fig. 1 shows:

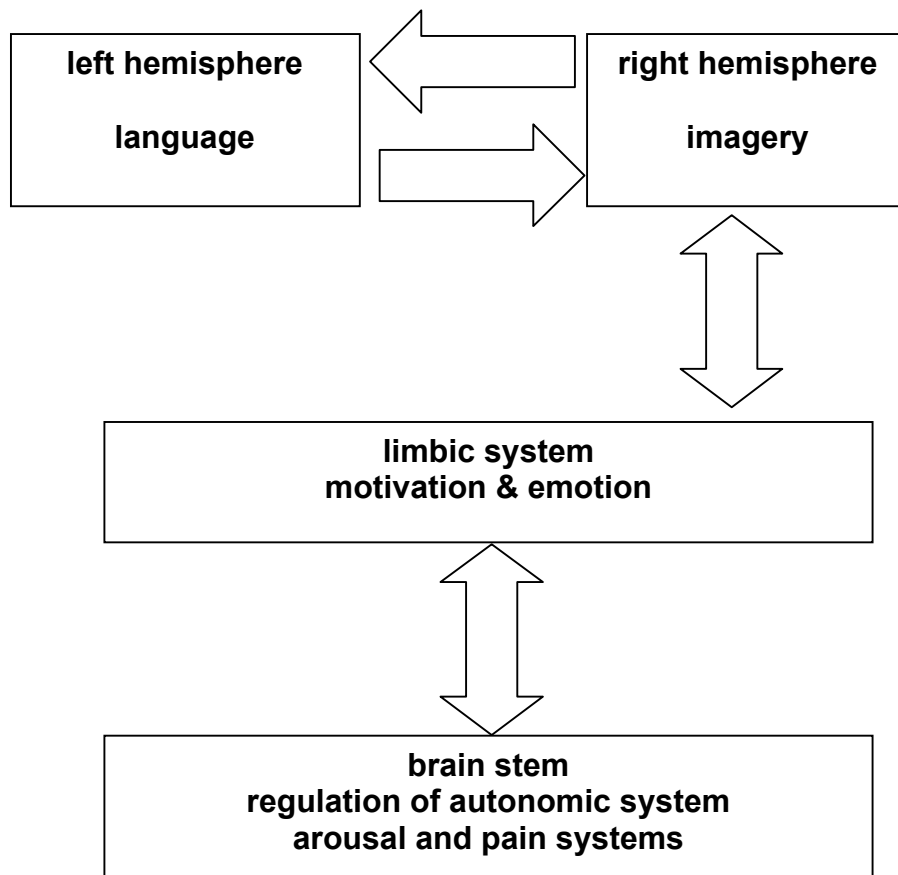


Fig. 1: Implicit processing of right brain and subsequent connections into left brain explicit system (adapted from Schore, 2010:180)

He portrays the implicit functioning of the right brain, and subsequent connections into the left brain explicit system. There is no direct connection between left hemisphere and the limbic system. He alerts us to the 'ongoing paradigm shift from the explicit cognitive to the implicit affective realm [which] is driven by new experimental data on emotional processes and updated clinical models for working with affective systems' (Schore, 2010:182). In his book, *The Science of the Art of Psychotherapy* (2012), he suggests that this paradigm shift has an impact on clinical technique, involving less emphasis on insight-oriented interpretations in order to make the unconscious conscious, and more on emotional processing. He sees changes in the connectivity of the right brain,

seat of socio-emotional experience and learning, as a fundamental outcome of effective treatment, and suggests that attention to right brain processes ushers in a deeper understanding of how psychotherapy works, that is, facilitating development of the unconscious mind itself.

Cozolino (2010) too describes the psychotherapist as facilitating the rebuilding of the brain. He explains how psychotherapy affects neural network integration and thus brings about behavioural change, and urges a closer look at the neurobiology of psychoanalysis in bringing more effective therapy to the patient. He points out that, rather than being a static entity, the brain is continually built and re-built by experience. Effective psychotherapy is thus a matter of enhancing plasticity in relevant neural circuits. Cozolino's view is that emotional attunement provides the best medium for neural growth and integration. In tuning in to Dan's states of mind and feeling, then, I was unwittingly enhancing the plasticity of his neural circuits - and the corollary is likely to be true when I was not sufficiently attuned. The implication is that Dan would be most able to take in new experience when least triggered, which as we have seen, was indeed the case.

Alvarez describes this shift in treatment approach, suggesting that 'it is not a question of making the unconscious conscious: rather it is a question of restructuring the unconscious itself' (2006:171). Integrating psychoanalysis with a child development perspective, Stern (1985) suggests that 'without the nonverbal it would be hard to achieve the empathic, participatory and resonating aspects of intersubjectivity', and alerts us to the risk of being 'consciously aware of the content or speech while processing the nonverbal out of awareness. With an intersubjectivist perspective a more conscious processing by the analyst of the nonverbal is necessary' (1985:80).

Thus implicitly relational knowledge stored in the nonverbal domain is currently seen to be at the centre of therapeutic change, not only by psychoanalytic psychotherapy, but by neuroscience (Schore, 2010) and child development research (Stern, 1998). This implicitly relational knowledge, which I have here called the template for relating, has been at the heart of psychoanalytic

psychotherapy since its inception, with Freud's (1890) discovery of the transference onto the therapist of the qualities of the key relationships in the patient's life. This leads me to the second crucial aspect of facilitating mental change, reflexivity.

Reflexivity

In working with Dan, emotional regulation was the vehicle for the approach to the world of his early years, in which there were felt to be monsters. This world was embodied in his episodic memory and hitherto unavailable to awareness. Green writes of how emotions 'experienced in the presence of another are increasingly accessible for not only processing and naming but also incorporation into an awareness of self state and ultimately a degree of self-regulation' (2003:16). She sees the crucial counterpart of this on the therapist's side as involving metabolisation through reflection on disturbing countertransference, and stresses that 'attunement does not mean jettisoning an analytic reflective function' (2003:17). Like co-operating parents, both attunement and reflexivity are key elements in therapeutic change, one standing in the inner world of the child, and one view having taken Britton's sideways step outside it, so that there is a getting to know of the potentially disturbing feeling, which is not overwhelming. Reflective capacity brings the potential for other ways of seeing, which in turn can bring other emotional responses.

Furthermore, the reflective capacity of the therapist can bring old and new into relation. It was necessary in my work with Dan not just to create a new pattern of relating that was attuned, but also to bring this new relationship into relation with the old world in an attuned way. The danger otherwise is that two or more worlds are felt to co-exist in the mind, but be out of contact, so that standing in one makes the other unavailable. Thus, it was necessary in one of the final sessions not just to feel with him but to tell him that he went to a dark dead place when I didn't come and get him, and he felt I'd been cruel. Earlier in the therapy, this may have triggered a primitive response, but after over three hundred hours of my (mostly unconscious) attempts at therapeutic emotional attunement, this reflection seemed to put the feeling at one remove, so that he

was no longer inside it, as it were. He could then come closer to me, rather than leave the room. Similarly, in a subsequent session, his 'I'll hurt you if you don't do what I say' could be understood in the world of our relationship now not so much a threat as a worry, and this reflection led to an idea that this was a world about 'care - love – cuddles', that he now had with mum.

Siegel describes 'the communication with and about emotion' as having 'a profound influence on a wide range of functions', including autobiographical memory and narrative, physiological regulation and interpersonal relatedness' (1998:6). This communicating about as well as communicating with is evidently crucial. He proposes that neural integration of left hemisphere processes such as 'the drive to explain cause-effect relationships' with those dominant in the right hemisphere, such as 'the capacity to understand the minds of others' and to be self aware, creates the capacity for coherent narratives. The clinical evidence demonstrates this integrative process. As the therapy continued, Dan was increasingly able to seek and create coherent narratives, a function that was missing or severely disrupted at the start of the therapy.

It seems that, in order to address the problem of relating being experienced as dangerous to Dan, it was necessary to reflect upon the process of relating that we were engaged in, in ways that he could tolerate, and communicate about how it felt. Crucially, the reflexivity had to be attuned to what he could bear. Again, it was not just the process but the qualities of the process that made this development possible - I had to tread gently in making things explicit, and go at his pace. When I overstepped the mark, and clumsily made things explicit without taking his feelings into account sufficiently, it was more than he could bear. However, overall, his own capacity for reflection seemed to begin to develop, once we had established this reflexive process between us.

That Dan could say, 'This is when you tell me what I'm showing you!' suggests that he had been able to internalise a capacity to notice and communicate about not just the content but the process of our relationship. He was increasingly aware of the patterns of cause and effect in our relationship - he was showing reflexivity. 'How come you always find me?' was another example of this

growing capacity for narrative overview. At the beginning of the therapy, he was not able to take an overview, or see patterns of relating in a left brain way. He communicated in bodily ways, which I had to tune into through right hemisphere processes and explore in myself, in the way Alvarez (1997) has described. It was only as we gradually became able not just to feel implicitly but to communicate explicitly about what was happening between us in the moment, thus getting a new perspective on it, that he began to attribute qualities to me and to see patterns of relating, rather than just experience them wordlessly. I suggest that in this way, a new frame of reference, a new template for relating, even a new view of the world and its possibilities, is created.

In summary, what I mean by the framing relationship is not new; but I use the idea to stress the implications of how implicitly relational knowledge sets a template for relating. Inside this frame of reference, some things seem possible, and others not. If in the framing relationship with the maternal mind, an infant could be said to be in a womb with a view, then perhaps the psychotherapeutic relationship offers a room with a view. This new world view needs to be connected through emotional experience and eventually narrative awareness, to the world of the early relationship. Both neuroscience and the clinical findings above attest to the power of reflexive intersubjectivity to integrate right and left brain experience. It seems to be in the development of this integrating capacity, in which the fears and threats of the early world can be both felt to some extent and made sense of in a new relationship, that psychoanalytic psychotherapy can bring about change for children whose minds have been adapted to adversity.

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